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Image# 13941301563

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

| TORIW 3X | For Other Than An Au | thorized Committee | Office Use Only |
|--|-----------------------------------|-------------------------------------|--|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If typing, over the lines. | type 12FE4M5 |
| American Society of | Plastic Surgeons PLA | STYPAC | |
| | | | |
| ADDRESS (number and street) Check if different | #310A | | |
| than previously reported. (ACC) | Washington | | DC 20001 - |
| 2. FEC IDENTIFICATION | NUMBER ▼ CI | TY▲ | STATE ▲ ZIP CODE ▲ |
| C C00249342 | | S THIS X NET | OR AMENDED (A) |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: | Report Due On: | | y 20 (M5) Aug 20 (M8) Nov 20 (M11 (Non-Election Year Only) 20 (M6) Sep 20 (M9) Dec 20 (M12 (Non-Election Year Only) |
| April 15 Quarterly Report | | r 20 (M4) Jul | 20 (M7) Oct 20 (M10) Jan 31 (YE) |
| July 15 Quarterly Report | (c) 12-Day | Primary (12P) Convention (129) | General (12G) Runoff (12R) C) Special (12S) |
| October 15 Quarterly Report January 31 | | M-M / E | iii uic |
| Year-End Report Year-End Report July 31 Mid-Year Report (Non-elec | (d) 30-Day | on on | State of |
| Year Only) (MY) Termination Repo | POST-Election Report for the: | General (30G) | Runoff (30R) Special (30S) |
| (TER) | Electi | on on | State of |
| 5. Covering Period | 01 01 2013 | through | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| - | | f my knowledge and bel | ief it is true, correct and complete. |
| Type or Print Name of Treasu | urer Dr. David Song MD | | |
| Signature of Treasurer | r. David Song MD | [Electronically F | iled] Date 07 31 2013 |
| NOTE: Submission of false, err | oneous, or incomplete information | on may subject the persor | signing this Report to the penalties of 2 U.S.C. §437g. |
| Office Use Only | | | FEC FORM 3X Rev. 12/2004 |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Society of Plastic Surgeons PLASTYPAC

Report Covering the Period: From: 01 01 2013 To: 06 30 2013

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | |
|-----|--|-------------------------|-----------------------------------|--|--|
| 6. | (a) Cash on Hand January 1, 2013 | | 37835.00 | | |
| | (b) Cash on Hand at Beginning of Reporting Period | 37835.00 | | | |
| | (c) Total Receipts (from Line 19) | 99089.96 | 99089.96 | | |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 136924.96 | 136924.96 | | |
| 7. | Total Disbursements (from Line 31) | 123179.49 | 123179.49 | | |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 13745.47 | 13745.47 | | |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | |

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Society of Plastic Surgeons PLASTYPAC

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| . Contributions (other than loans) From: | 1 | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | 79495.30 | 79495.30 |
| (i) Itemized (use Schedule A) | 79493.30 | 7 7 7 |
| (ii) Unitemized | 19594.66 | 19594.66 |
| (iii) TOTAL (add | | |
| Lines 11(a)(i) and (ii)▶ | 99089.96 | 99089.96 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees | | |
| (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines | | |
| 11(a)(iii), (b), and (c)) (Carry | | |
| Totals to Line 33, page 5) | 99089.96 | 99089.96 |
| . Transfers From Affiliated/Other | | |
| Party Committees | 0.00 | 0.00 |
| . All Loans Received | 0.00 | 0.00 |
| | 0.00 | 0.00 |
| Loan Repayments Received | 0.00 | 0.00 |
| Offsets To Operating Expenditures | | |
| (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| (Carry Totals to Line 37, page 5) | | 0.00 |
| to Federal Candidates and Other | | |
| Political Committees | 0.00 | 0.00 |
| Other Federal Receipts | 7 | |
| (Dividends, Interest, etc.) | 0.00 | 0.00 |
| . Transfers from Non-Federal and Levin Funds | 3.00 | |
| (a) Non-Federal Account | | |
| (from Schedule H3) | 0.00 | 0.00 |
| , , , , , , , , , , , , , , , , , , , | 7 | 4 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | | |
| (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)) 7. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 99089.96 | 990 |
| | 33003.30 | 33000.5 |
| . Total Federal Receipts | 00000 | 00000 |
| (subtract Line 18(c) from Line 19) ▶ | 99089.96 | 99089.9 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|--|-------------------------------|-----------------------------------|--|--|
| Operating Expenditures: (a) Allocated Federal/Non-Federal | 10101 11110 1 01100 | Odicinali Teal to Bate | | |
| Activity (from Schedule H4) | | | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (ii) Non-Federal Share | 0.00 | 0.00 | | |
| (b) Other Federal Operating | | | | |
| Expenditures | 849.49 | 849.49 | | |
| (c) Total Operating Expenditures | 242.42 | 242.40 | | |
| (add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party | 849.49 | 849.49 | | |
| Committees | 0.00 | 0.00 | | |
| Contributions to Federal Candidates/Committees | | | | |
| and Other Political Committees | 121500.00 | 121500.00 | | |
| Independent Expenditures | 0.00 | 0.00 | | |
| (use Schedule E)Coordinated Party Expenditures | 0.00 | 0.00 | | |
| (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 | | |
| (| 7 | | | |
| Loan Repayments Made | 0.00 | 0.00 | | |
| Lagra Mada | 0.00 | 0.00 | | |
| Loans MadeRefunds of Contributions To: | 0.00 | 3.00 | | |
| (a) Individuals/Persons Other Than Political Committees | 830.00 | 830.00 | | |
| i | | | | |
| (b) Political Party Committees | 0.00 | 0.00 | | |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | | |
| (34011 43 17.03) | | 7 | | |
| (d) Total Contribution Refunds | 200.00 | | | |
| (add Lines 28(a), (b), and (c))▶ | 830.00 | 830.00 | | |
| Other Disbursements | 0.00 | 0.00 | | |
| Other Dispursements | 0.00 | 3 | | |
| Federal Election Activity (2 U.S.C. §431(20)) | | | | |
| (a) Allocated Federal Election Activity | | | | |
| (from Schedule H6) | 0.00 | 0.00 | | |
| (i) Federal Share | | | | |
| (ii) "Levin" Share | 0.00 | 0.00 | | |
| (b) Federal Election Activity Paid Entirely | | | | |
| With Federal Funds | 0.00 | 0.00 | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | 0.00 | 0.00 | | |
| 2.1100 00(a)(1), 00(a)(1) and 00(b)) | | | | |
| Total Disbursements (add Lines 21(c), 22, | | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 123179.49 | 123179.49 | | |
| Total Federal Disbursements | | | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | | |
| from Line 31) | 123179.49 | 123179.49 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 99089.96 | 99089.96 |
| 4. Total Contribution Refunds (from Line 28(d)) | 830.00 | 830.00 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 98259.96 | 98259.96 |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ | 849.49 | 849.49 |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 3. Net Operating Expenditures (subtract Line 37 from Line 36) | 849.49 | 849.49 |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | | 6 | OF | 88 | |
|------------------|------------------|-----|--|-----|------|-----|---|----|----|----|
| | (check only one) | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | | |
| | 1 | 13 | | 14 | | 15 | | 16 | | 17 |

Anv information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| or for commercial purposes, other than using the | e name and address of any political committee to | o solicit contributions from such committee. |
|--|--|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic Su | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) David L. Abramson MD Mailing Address 42A E 74th St | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 7AA84851-F4DD-41DB- |
| New York | NY 10021-2735 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| | 333.30 | |
| Full Name (Last, First, Middle Initial) Hilton C. Adler MD | | Date of Receipt |
| Mailing Address 179 N Belle Mead Ave | | M M / D D / Y Y Y Y Y |
| Ste 1 | State Zip Code | 05 22 2013 |
| East Setauket | NY 11733-3528 | Transaction ID : DD20F7927E6E4500B08 |
| | | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 380.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 380.00 | |
| Full Name (Last, First, Middle Initial) C. Arturo Aguillon-Bouche MD | | Date of Receipt |
| Mailing Address 69 Hall Rd | | 02 212013 |
| City | State Zip Code | Transaction ID : D63A612071F33C62750 |
| Sturbridge | MA 01566-1519 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 350.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | Aggrogato Toal-to-Date ▼ | |
| Other (specify) ▼ | 350.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1230.00 |
| TOTAL This Period (last page this line number | <u> </u> | |

| FOR LINE NUMBER: | | | | | PAGE | | 7 | OF | 88 |
|------------------|-----|--|-----|--|------|--|----|----|----|
| (check only one) | | | | | | | | | |
| X | 11a | | 11b | | 11c | | 12 | ! | |
| | 13 | | 14 | | 15 | | 16 | ; | 17 |

| | statements may not be sold or used by any persole name and address of any political committee to | |
|--|--|---------------------------------------|
| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sur | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Goesel Anson MD | | Date of Receipt |
| Mailing Address 8530 W Sunset Rd Ste 130 | | 03 19 2013 |
| City | State Zip Code | Transaction ID : DB6F351522A74436B2B0 |
| Las Vegas | NV 89113-2244 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) Pamela M. Antoniuk MD | | Date of Receipt |
| Mailing Address 2801 University Dr S | | M = M / D = D / Y = Y = Y |
| Sanford Plastic Surgery | Chata 7in Onda | 05 20 2013 |
| City | State Zip Code | Transaction ID : EACB01A5-2528-4B65- |
| Fargo | ND 58103-6029 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. Amy Arnold MD | | Date of Receipt |
| Mailing Address 5200 N Federal Hwy Ste 7 | | 01 30 2013 |
| City | State Zip Code | Transaction ID: 7569418CC0FE0EAED0E |
| Fort Lauderdale | FL 33308-3253 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 300.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | riggiogato Toal-to-Date ▼ | |
| Other (specify) ▼ | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1100.00 |
| CODITION OF THE COPING THIS FAGE (OPLIONAL) | > | |
| TOTAL This Period (last page this line number | only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | | 8 | OF | 88 | |
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| | | 13 | | 14 | | 15 | | 16 | 6 | 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| | the name and address of any political committee to | |
|---|--|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic Su | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) John A. Attwood MD | | Date of Receipt |
| Mailing Address 244 Western Ave | | 06 11 2013 - |
| City | State Zip Code | Transaction ID : 9B2760E33ACC49999952 |
| South Portland | ME 04106-2430 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | l |
| Receipt For: | Aggregate Year-to-Date ▼ | l e e e e e e e e e e e e e e e e e e e |
| Primary General Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) 3. Edwin N. Austin MD | | Date of Receipt |
| Mailing Address 875 Oak St SE | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Ste 4060 City | State Zip Code | 02 28 2013 Transaction ID : A80134028DA2807292A |
| Salem | OR 97301-3990 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 250.00 |
| Name of Employer | Occupation | l |
| Self | Physician | l |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) . Nia D. Banks MD | | Date of Receipt |
| Mailing Address 8116 Good Luck Rd Ste 215 | | 05 13 2013 |
| City | State Zip Code | Transaction ID : B55A0609-0069-4C40- |
| Lanham FEC ID number of contributing federal political committee | MD 20706-3508 | Amount of Each Receipt this Period 500.00 |
| federal political committee. | | |
| Name of Employer | Occupation | l |
| Self Receipt For: | Physician | l |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | l e e e e e e e e e e e e e e e e e e e |
| Other (specify) ▼ | 500.00 | |
| SUBTOTAL of Receipts This Page (optional). | > | 1050.00 |
| | er only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LIN | IE NUMBER | : PAGE | 9 OF | 88 | | | | |
|------------------|-----------|--------|------|----|--|--|--|--|
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| X 11a | 11b | 11c | 12 | | | | | |
| 13 | 14 | 15 | 16 | 17 | | | | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| or for commercial purposes, other than using | the name and address of any political committee to | solicit contributions from such committee. |
|---|--|---|
| NAME OF COMMITTEE (In Full) American Society of Plastic S | | |
| Full Name (Last, First, Middle Initial) 4. W. Byron Barber MD | | Date of Receipt |
| Mailing Address 1591 Yanceyville St Ste 100 | | 06 12 2013 |
| City Greensboro | State Zip Code NC 27405-6942 | Transaction ID: 8461D02F-E7FE-4AF0- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Self | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) C. Bob Basu MD Mailing Address 6400 Fannin St | | Date of Receipt |
| Ste 2100 City Houston | State Zip Code TX 77030-1542 | Transaction ID : 9045336A-26CC-4BD0- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 2013.00 |
| Name of Employer Basu Plastic Surgery | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 2013.00 | |
| Full Name (Last, First, Middle Initial) C. Glenn A. Becker MD | | Date of Receipt |
| Mailing Address 121 E 60th St Apt 2E | | 02 21 2013 |
| City New York | State Zip Code NY 10022-1164 | Transaction ID : 8E664742-2202-4659- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Self | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | l | 2513.00 |
| TOTAL This Period (last page this line numb | per only) | |

| FOR LINE NUMBER: | | | | PAGE | | 10 | OF | 88 | | |
|------------------|------------------|-----|--|------|--|-----|----|----|---|----|
| (| (check only one) | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | | |
| | | 13 | | 14 | | 15 | | 16 | ; | 17 |

| | statements may not be sold or used by any persol e name and address of any political committee to | |
|--|--|--------------------------------------|
| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sui | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Richard H. Bensimon MD | | Date of Receipt |
| Mailing Address 1200 NW Naito Pkwy Ste 330 | | 05 23 _ 2013 _ |
| City | State Zip Code | Transaction ID : 7E9F9524-435C-4A55- |
| Portland | OR 97209-2878 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) R. Laurence Berkowitz MD | | Date of Receipt |
| Mailing Address 3803 S Bascom Ave | | M = M / D = D / Y = Y = Y |
| Ste 100 | State 7:- Or 1- | 04 05 2013 |
| City | State Zip Code CA 95008-7317 | Transaction ID : E3273333-82CB-48FB- |
| Campbell | CA 95008-7317 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 400.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 400.00 | · |
| Full Name (Last, First, Middle Initial) C. Keith S. Berman MD | | Date of Receipt |
| Mailing Address 1055 Hylan Blvd | | 06 13 _ 2013 _ |
| City | State Zip Code | Transaction ID : 880520C2-4EB3-40B3- |
| Staten Island | NY 10305-2025 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 500.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1150.00 |
| age (optional) | > | |
| TOTAL This Period (last page this line number | only) | |

| | FOR LINE NUMBER: | | | | PAGE | . 1 | 11 | OF | | 88 | | |
|------------------|------------------|---|-----|--|------|-----|-----|----|----|----|--|----|
| (check only one) | | | | | | | | | | | | |
| | | X | 11a | | 11b | | 11c | | 12 | | | |
| | | | 13 | | 14 | | 15 | | 16 | ; | | 17 |

| | statements may not be sold or used by any persole name and address of any political committee to | |
|---|--|--|
| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sur | geons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) 1. James Boehmler MD | | Date of Receipt |
| Mailing Address 915 Olentangy River Rd | | M = M / D = D / Y = Y = Y = Y |
| Ste 2100 City | State Zip Code | 06 04 2013 Transaction ID : 97D20FC7-4044-4BE3- |
| Columbus | OH 43212-3154 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Jennifer E. Boll MD | | Date of Receipt |
| Mailing Address 1520 S Dobson Rd | | M = M / D = D / Y = Y = Y |
| Ste 314 | | 02 05 2013 |
| City | State Zip Code | Transaction ID: 54EC6EF55D29920A19B |
| Mesa | AZ 85202-4710 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) | | |
| Matthew J. Bonanno MD, FACS | | Date of Receipt |
| Mailing Address 215 E 77th St | | 02 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : EA7AA33D-6B84-4118- |
| New York | NY 10075-2059 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 1000.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1550.00 |
| | | |
| TOTAL This Period (last page this line number | only) | |

FOR LINE NUMBER: PAGE 12 OF 88

| | FOR LINE NOWBER. FIAGE 12 OF GO | | | | | | | | | |
|--|---------------------------------|-----|-----|----|----|--|--|--|--|--|
| Use separate schedule(s) | (check only one) | | | | | | | | | |
| for each category of the Detailed Summary Page | X 11a | 11b | 11c | 12 | | | | | | |
| zotanou cummu, rugo | 13 | 14 | 15 | 16 | 17 | | | | | |

| or for commercial purposes, other than using | ng the name and address of any political committee | |
|---|--|--------------------------------------|
| NAME OF COMMITTEE (In Full) American Society of Plastic | Surgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Mark T. Boschert MD | | Date of Receipt |
| Mailing Address 145 Saint Peters Centre | Blvd | 05 14 2013 |
| City | State Zip Code | Transaction ID : 013D1723-414A-42DD- |
| Saint Peters | MO 63376-5103 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) Reith E. Brandt MD | | Date of Receipt |
| Mailing Address 660 S Euclid Ave | | M = M / D = D / Y = Y = Y |
| Box 8238, 1150 Northwe | est Tower State Zip Code | 03 19 2013 |
| Saint Louis | MO 63110-1010 | Transaction ID: 2013DCBF63CA48C08A2 |
| FEC ID number of contributing | 33.10 13.10 | Amount of Lacif neceipt this Period |
| federal political committee. | С | 1000.00 |
| Name of Employer | Occupation | |
| Div. of Plastic & Reconstructi Surgery | William G. Hamm Prof | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) C. Glen S. Brooks MD | | Date of Receipt |
| Mailing Address 776 Longmeadow St | | 02 12 2013 |
| City | State Zip Code | Transaction ID: 57FD4D6DF8F7C28BC59 |
| Longmeadow | MA 01106-2219 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 250.00 | |
| SUBTOTAL of Receipts This Page (option | al) > | 1750.00 |
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FOR LINE NUMBER: PAGE 13 OF 88 Use separate schedule(s) for each category of the Detailed Summary Page

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| | Statements may not be sold or used by any persible name and address of any political committee to | |
|---|---|---------------------------------------|
| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Su | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Jennifer B. Buck MD | Date of Receipt | |
| Mailing Address 35080 US Highway 19 N | | 02 05 2013 |
| City | State Zip Code | Transaction ID : D28BEB6AE0111D13431 |
| Palm Harbor | FL 34684-1925 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) Louis P. Bucky MD | • | Date of Receipt |
| Mailing Address 230 W Washington Sq | | M = M / D = D / Y = Y = Y |
| Ste 101 | Choic 7'- 0 ' | 01 11 2013 |
| City | State Zip Code | Transaction ID: AFAE899D4B93B45B19D |
| Philadelphia | PA 19106-3500 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| The Farm Journal Building | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. Michael J. Busuito MD | | Date of Receipt |
| Mailing Address 1080 Kirts Blvd Ste 700 | | 06 24 2013 |
| City | State Zip Code | Transaction ID : 774A514F5A9045EE87ED |
| Troy | MI 48084-4853 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | - |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1250.00 |
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| TOTAL This Period (last page this line number | er only) | |

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 14 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Donald J. Campbell MD Date of Receipt Mailing Address 1296 Sims St Nepsa Suite B 06 2013 City Zip Code State Transaction ID: 4BA3A99C0DC749EABE3F Gainesville GA 30501-3873 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Raymond A. Capone MD Date of Receipt Mailing Address Shadyside Surgi-Center 03 22 2013 City State Zip Code Transaction ID: 3F0B48BA2A614AC3B507 PA Pittsburgh 15206-3707 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Guy Cappuccino MD Date of Receipt Mailing Address 1304 S Main St 02 21 2013 City Zip Code State Transaction ID: A686A7B2B5591D48F11 MD Mount Airy 21771-5329 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

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| EMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | (check only one) | 11c | 12 | | | | | |
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| by information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. | | | | | | | | | |

NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Holly Casey Wall MD Date of Receipt Mailing Address 8600 Fern Ave 30 2013 City State Zip Code Transaction ID: 5BF8901D-23C3-4BCB-71105-5639 Shreveport LA Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael G. Cedars MD Date of Receipt Mailing Address 3300 Webster St Ste 1106 06 27 2013 City State Zip Code Transaction ID: 9074938BF795467D911F Oakland CA 94609-3125 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin C. Chung MD Date of Receipt Mailing Address 1500 E Medical Center Dr 2013 03 2130 Taubman Center Space 5340 04 City Zip Code State Transaction ID: 516538CB-E4C0-4E68-MI Ann Arbor 48109-5000 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Professor Self Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| | Statements may not be sold or used by any person e name and address of any political committee to | |
|---|--|---------------------------------------|
| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sur | geons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) John Q. Cook MD | | Date of Receipt |
| Mailing Address 737 N Michigan Ave | | |
| Ste 760 | | 05 28 _ 2013 _ |
| City | State Zip Code | Transaction ID : 9EEF5BEE41714B93AFAE |
| Chicago | IL 60611-6662 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) John J. Corey MD | | Date of Receipt |
| Mailing Address 10210 N 92nd St | | M M / D D / Y Y Y Y |
| Ste 200 | State Zin Codo | 02 05 2013 |
| City Scottsdale | State Zip Code AZ 85258-4524 | Transaction ID : 952C4565-60FE-402C- |
| | 00200-4024 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) C. James E. Craigie MD | | Date of Receipt |
| Mailing Address 1300 Hospital Dr | | M = M / D = D / Y = Y = Y |
| Ste 120 | State Zin Codo | 02 12 2013 |
| City Mount Pleasant | State Zip Code SC 29464-3204 | Transaction ID : B76207D65BC4D18F0F3 |
| | | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 300.00 | |
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FOR LINE NUMBER: PAGE 17 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) George A. Csank MD Date of Receipt Mailing Address 426 South St 20 2013 City Zip Code State Transaction ID: A44E4B1C-01A0-4B00-01201-8228 Pittsfield MA Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 01 01 2013 City State Zip Code Transaction ID: 42918E2A68F2B71466DC Chapel Hill NC 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 230.00 federal political committee. Name of Employer Occupation UNC Div of Plastic & Recon Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 01 2013 City Zip Code State Transaction ID: 4A02B68ED45E94F16F6C NC Chapel Hill 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 230.00 С federal political committee. Name of Employer Occupation UNC Div of Plastic & Recon Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) 760.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 18 OF 88 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 06 2013 City Zip Code State Transaction ID: 4B69BAF356B3BC64C781 NC Chapel Hill 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation **UNC Div of Plastic & Recon Surgery** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 03 02 2013 City State Zip Code Transaction ID: 4969AB87CC14E50D7F91 Chapel Hill NC 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 91.50 federal political committee. Name of Employer Occupation UNC Div of Plastic & Recon Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 02 04 2013 City Zip Code State Transaction ID: 40BAB4C2C94789350F8A NC Chapel Hill 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 91.50 С federal political committee. Name of Employer Occupation UNC Div of Plastic & Recon Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) 308.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -9

FOR LINE NUMBER: PAGE 19 OF 88 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 2013 02 City Zip Code State Transaction ID: 4EB0AD5D79970F30F5E6 NC Chapel Hill 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 91.50 federal political committee. Name of Employer Occupation **UNC Div of Plastic & Recon Surgery** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lynn A. Damitz MD Date of Receipt Mailing Address 4917 Mill Hill Ln 06 02 2013 City State Zip Code Transaction ID: 48FBBB06B8E84FE96767 Chapel Hill NC 27517-7447 Amount of Each Receipt this Period FEC ID number of contributing 91.50 federal political committee. Name of Employer Occupation UNC Div of Plastic & Recon Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 951.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chantelle M. Decroff MD Date of Receipt Mailing Address 6114 Wooded Creek Cv 02 24 2013 City Zip Code State Transaction ID: A057F798-581B-4EDE-TX Temple 76502-7959 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 433.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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| ny information copied from such Reports and Statements ma | ay not be sold or used by any pe | son fo | or the pu | rpose o | f so | liciting | con | tribut | ions | |
| r for commercial purposes, other than using the name and ac | ddress of any political committee | to soli | icit contri | butions | fron | n such | con | nmitt | ee. | |

NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Gregory Delange MD Date of Receipt Mailing Address 2865 Pga Blvd 04 2013 City State Zip Code Transaction ID: B5FFA237-0294-4FAF-FL Palm Beach Gardens 33410-2910 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph B. Delozier MD Date of Receipt Mailing Address 209 23rd Ave N 05 20 2013 City State Zip Code Transaction ID: 81008627-3FAF-496E-Nashville TN 37203-1501 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lynn D. Derby MD Date of Receipt Mailing Address 235 E Rowan Ave 2013 12 Ste 206 City State Zip Code Transaction ID: 63603E65B065DD16375 WA 99207-1240 Spokane Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional).....

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| or for commercial purposes, other than using the | he name and address of any political committee | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic Su | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) John Wm. Derr MD Mailing Address 4001 Kresge Way Ste 320 City Louisville FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: | State Zip Code KY 40207-4640 C Occupation Physician | Date of Receipt 02 12 2013 Transaction ID: 0FD4F1A3-0D88-4146- Amount of Each Receipt this Period 250.00 |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) Donald M. Ditmars MD Mailing Address 2799 W Grand Blvd Plastic Surgery Clinic City Detroit FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code MI 48202-2608 C Occupation Physician Aggregate Year-to-Date ▼ 250.00 | Date of Receipt O2 28 2013 Transaction ID: 3E3751416922BD448F7 Amount of Each Receipt this Period 250.00 |
| Full Name (Last, First, Middle Initial) Anthony Echo MD Mailing Address Suite 2200 6560 Fannin, Scurlock Town City Houston FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code TX 77030 C Occupation Physician Aggregate Year-to-Date 500.00 | Date of Receipt M |
| SUBTOTAL of Receipts This Page (optional) | <u> </u> | 1000.00 |
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| | the name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic S | Surgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Aric J. Eckhardt MD Mailing Address 615 Valley View Dr Ste 203 City Moline FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) | State Zip Code IL 61265-6180 C Occupation Physician Aggregate Year-to-Date ▼ 300.00 | Date of Receipt M |
| Mailing Address 2950 Northup Way Ste 100 City Bellevue FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) ▼ | State Zip Code WA 98004-1406 C Occupation Physician Aggregate Year-to-Date ▼ 2000.00 | Date of Receipt 03 13 2013 Transaction ID: 6618E893-63C9-48AC- Amount of Each Receipt this Period 2000.00 |
| Full Name (Last, First, Middle Initial) Michael A. Epstein MD Mailing Address 1535 Lake Cook Rd Ste 211 City Northbrook FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code IL 60062-1451 C Occupation Physician Aggregate Year-to-Date ▼ 500.00 | Date of Receipt M |
| SUBTOTAL of Receipts This Page (optional) | | 2800.00 |
| TOTAL This Period (last page this line numb | per only) | |

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| or for commercial purposes, other than using | the name and address of any political committee to | solicit contributions from such committee. |
|--|--|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic S | | |
| Full Name (Last, First, Middle Initial) A. Gregory R.D. Evans MD, FACS | | Date of Receipt |
| Mailing Address 200 S Manchester Ave Ste 650 | | 03 12 2013 |
| City | State Zip Code | Transaction ID: 204DC97E45C3E392AC6 |
| Orange | CA 92868-3224 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| University of California Irvine | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Audrey E. Farahmand MD Mailing Address 44000 Malayardin Acceptance | Date of Receipt | |
| Mailing Address 14090 Metropolis Ave Ste 102 | | 03 22 2013 |
| City | State Zip Code | Transaction ID : D2F841B0FC234162AD89 |
| Fort Myers | FL 33912-4451 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 1000.00 |
| Name of Employer | Occupation | |
| Farahmand Plastic Surgery | Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |
| Full Name (Last, First, Middle Initial) 2. James L. Fernau MD | | Date of Receipt |
| Mailing Address 1000 Cliffmine Rd Ste 120 | | 02 12 2013 |
| City | State Zip Code | Transaction ID: 059419EC-6F0C-42FF- |
| Pittsburgh | PA 15275-1007 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 400.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 400.00 | |
| SUBTOTAL of Receipts This Page (optional) | <u>·</u> | 1650.00 |
| TOTAL This Period (last page this line numb | er only) | |

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| | statements may not be sold or used by any persone name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Su | ırgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Neil A. Fine MD | | Date of Receipt |
| Mailing Address 676 N Saint Clair St Ste 1525A | | 02 12 2013 |
| City | State Zip Code | Transaction ID : 2FCB7D64B2B6B8D43E3 |
| Chicago | IL 60611-2862 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 00 0 | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) Neil A. Fine MD | | Date of Receipt |
| Mailing Address 676 N Saint Clair St | | M = M / D = D / Y = Y = Y |
| Ste 1525A | | 02 16 2013 |
| City | State Zip Code | Transaction ID: 479E1FF8-8F85-46E8- |
| Chicago | IL 60611-2862 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) 5. Jeffrey D. Friedman MD | | Date of Receipt |
| Mailing Address 6560 Fannin St Ste 2200 | | 05 08 2013 |
| City | State Zip Code | Transaction ID : B2CDA195A5B145258350 |
| Houston | TX 77030-2715 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | | 1 |
| Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1300.00 |
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| | statements may not be sold or used by any persole name and address of any political committee to | | | | | |
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| NAME OF COMMITTEE (In Full) | | | | | | |
| American Society of Plastic Sui | rgeons PLASTYPAC | | | | | |
| Full Name (Last, First, Middle Initial) A. Gregory C. Gaines MD | | Date of Receipt | | | | |
| Mailing Address 108 NW 76th Dr | | M = M / D = D / Y = Y = Y | | | | |
| Gaines Plastic Surgery, Pllc, S | | 05 02 2013 | | | | |
| City | State Zip Code | Transaction ID : DAB926C9-ED0B-4B92- | | | | |
| Gainesville | FL 32607-6652 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 500.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Center for Plastic & Recon. Surgery | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | 00 0 | | | | | |
| Other (specify) ▼ | 500.00 | | | | | |
| Full Name (Last, First, Middle Initial) J. Lynne Garrison MD | Lynne Garrison MD | | | | | |
| Mailing Address 400 Spring Forest Rd | | 05 14 2013 | | | | |
| City | State Zip Code | Transaction ID : 7F223272-9EAC-445B- | | | | |
| Greenville | NC 27834-7244 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing | | | | | | |
| federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | 00 0 | | | | | |
| Other (specify) ▼ | 250.00 | | | | | |
| Full Name (Last, First, Middle Initial) C. Daniel Garritano MD | | Date of Receipt | | | | |
| Mailing Address 4139 Boardman Canfield Rd Ste 2 | | 02 05 2013 | | | | |
| City | State Zip Code | Transaction ID : 1DF40B0FE429E8DEF5B | | | | |
| Canfield | OH 44406-9034 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | | | | | | |
| Other (specify) ▼ | 250.00 | | | | | |
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| | statements may not be sold or used by any persole name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sur | geons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) John E. Gatti MD | | Date of Receipt |
| Mailing Address 409 Kings Hwy S | | 03 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID : BF53F7E5F438EA57FD3 |
| Cherry Hill | NJ 08034-2512 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Mary K. Gingrass MD | | Date of Receipt |
| Mailing Address 1915 State St | | M = M / D = D / Y = Y = Y = Y |
| City | State Zip Code | 03 28 2013 Transaction ID : 145305C97D744119654 |
| Nashville | TN 37203-2209 | Transaction ID : 1AF390EC87D74411865A Amount of Each Receipt this Period |
| _ | 5/205-2203 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 750.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 750.00 | |
| Full Name (Last, First, Middle Initial) C. Robert H. Gotkin MD | | Date of Receipt |
| Mailing Address 625 Park Ave | | 04 05 2013 |
| City | State Zip Code | Transaction ID : 2094EA8A-44A9-46B7- |
| New York | NY 10065-6545 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 500.00 | |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Braun H. Graham MD Date of Receipt Mailing Address 2255 S Tamiami Trl 05 2013 City State Zip Code Transaction ID: 309B9F73-92C5-4D35-FL Sarasota 34239-3806 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. John A. Grossman MD Date of Receipt Mailing Address 4600 Hale Parkway 05 03 2013 City State Zip Code Transaction ID: 47B2AFC48D832C4CA5C5 CO Denver 80220 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Arturo K. Guiloff MD Date of Receipt Mailing Address 2865 Pga Blvd 05 14 2013 Ste 100 City State Zip Code Transaction ID: 988F8457-7F3F-4D4F-FL Palm Beach Gardens 33410-2910 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Estetica Institute Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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28 OF 88 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Jack P. Gunter MD Date of Receipt Mailing Address 8144 Walnut Hill Ln Ste 170 2013 City State Zip Code Transaction ID: F4473540BBCF49D4854F TX Dallas 75231-4394 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christian I. Guzman MD Date of Receipt Mailing Address 440 Mamaroneck Ave Ste 412 04 2013 11 City State Zip Code Transaction ID: 7A657820-7809-45DA-NY Harrison 10528-2418 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Josef G. Hadeed MD Date of Receipt Mailing Address 20 Glenlake Pkwy NE 05 11 2013 Glenlake Medical Center City Zip Code State Transaction ID: FEEB6674-4D06-406A-GA Atlanta 30328-3473 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional).....

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| or for commercial purposes, other than using the | name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | D. 10-11-11 | |
| American Society of Plastic Sur | geons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. David E. Halpern MD | | Date of Receipt |
| Mailing Address 120 S Fremont Ave | | 05 02 2013 |
| City | State Zip Code | Transaction ID : 9C427E70-AFFE-4E2B- |
| Tampa | FL 33606-1703 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Tampa Bay Plastic Su | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) Hauw T. Han MD | | Date of Receipt |
| Mailing Address 6770 Cincinnati Dayton Rd | | M = M / D = D / Y = Y = Y |
| Ste 200 | State 7in Code | 06 28 2013 |
| City | State Zip Code | Transaction ID : 36E2580A-1409-4F1F- |
| Liberty Township | OH 45044-9319 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) 5. Stephen P. Hardy MD | | Date of Receipt |
| Mailing Address 2802 Great Northern Loop | | 05 31 2013 |
| City | State Zip Code | Transaction ID : 8ECD9138-9DA0-42AE- |
| Missoula | MT 59808-1738 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 1000.00 | |
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| or for commercial purposes, other than using | the name and address of any political committee | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic S | Surgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Donnis S. Hobson MD Mailing Address 365 Hawthorne Ave Ste 202 City Oakland FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) | State Zip Code CA 94609-3114 C Occupation Physician Aggregate Year-to-Date ▼ 300.00 | Date of Receipt 03 22 2013 Transaction ID: 073E13A0806946B78E56 Amount of Each Receipt this Period 300.00 |
| Address 8220 Walnut Hill Ln Ste 206 City Dallas FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) ▼ Indicate Initial, which is initial, with the primary General Other (specify) ▼ | State Zip Code TX 75231-4406 C Occupation Physician Aggregate Year-to-Date ▼ 500.00 | Date of Receipt 03 22 2013 Transaction ID: 2065B8B767824ACCB0B7 Amount of Each Receipt this Period 500.00 |
| Full Name (Last, First, Middle Initial) Scott D. Holley MD Mailing Address 7971 Moorsbridge Rd City Portage FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code MI 49024-4075 C Occupation Physician Aggregate Year-to-Date ▼ 250.00 | Date of Receipt 03 19 2013 Transaction ID: 7DDC82D554154B849ECA Amount of Each Receipt this Period 250.00 |
| SUBTOTAL of Receipts This Page (optional |) | 1050.00 |
| TOTAL This Period (last page this line numl | ber only) | |

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

| or for commercial purposes, other than using | the name and address of any political committee to | solicit contributions from such committee. |
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| NAME OF COMMITTEE (In Full) American Society of Plastic S | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Thomas J. Hubbard MD | | Date of Receipt |
| Mailing Address 329 Phillip Ave | | 04 05 2013 |
| City Virginia Beach | State Zip Code VA 23454-4461 | Transaction ID : 8F50CCD9-BF3C-460E- |
| FEC ID number of contributing federal political committee. | C 23434-4401 | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) Charles E. Hughes MD Mailing Address 8051 S Emerson Ave | | Date of Receipt |
| Ste 450 | State Zip Code | 05 02 2013 Transaction ID : DC03E15C-5835-48D3- |
| Indianapolis FEC ID number of contributing federal political committee. | IN 46237-8667 | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self Receipt For: | Occupation Physician Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) J. Benjamin Hugo MD Mailing Address 328 Louisa Ave | | Date of Receipt |
| Ste 110 | | 05 22 2013 |
| City Virginia Beach | State Zip Code VA 23454-4668 | Transaction ID: 59F6B701EDDC4842A4FF Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 365.00 |
| Name of Employer Self | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 365.00 | |
| SUBTOTAL of Receipts This Page (optional). | | 1365.00 |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Joseph Paul Hunstad MD Date of Receipt Mailing Address 11208 Statesville Rd Ste 300 2013 City State Zip Code Transaction ID: ECF76E29-5696-471B-NC Huntersville 28078-7637 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elliot W. Jacobs MD Date of Receipt Mailing Address 815 Park Ave 03 12 2013 City State Zip Code Transaction ID: 20158192CAE9E4AA2AD NY New York 10021-3295 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Jeffrey E. Janis MD Date of Receipt Mailing Address 1801 Inwood Rd 05 02 2013 Wa4.250 City Zip Code State Transaction ID: B97A5EFD-BBF3-4638-TX **Dallas** 75235-7202 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **UTSW Medical Center** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| | Statements may not be sold or used by any pers e name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sur | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Debra J. Johnson MD | | Date of Receipt |
| Mailing Address 3500 Cutter Way | | 03 03 2013 |
| City | State Zip Code | Transaction ID : 40EA9C9AD537C7A804F0 |
| Sacramento | CA 95818-4442 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer | Occupation | 1 |
| The Plastic Surgery Center | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | | |
| Other (specify) ▼ | 600.00 | |
| Full Name (Last, First, Middle Initial) 3. Debra J. Johnson MD | | Date of Receipt |
| Mailing Address 3500 Cutter Way | | 04 03 _ 2013 _ |
| City | State Zip Code | Transaction ID : 47A59524CCC427D1C1D5 |
| Sacramento | CA 95818-4442 | Amount of Each Receipt this Period |
| FEC ID number of contributing | 00010 1112 | |
| federal political committee. | C | 100.00 |
| Name of Employer | Occupation | |
| The Plastic Surgery Center | Physician |] |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 600.00 | |
| Full Name (Last, First, Middle Initial) C. Debra J. Johnson MD | | Date of Receipt |
| Mailing Address 3500 Cutter Way | | 05 03 2013 |
| City | State Zip Code | Transaction ID : 4A178FC5B188473DDA50 |
| Sacramento | CA 95818-4442 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer | Occupation | |
| The Plastic Surgery Center | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ |] |
| Primary General | | |
| Other (specify) ▼ | 600.00 | |
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| | d Statements may not be sold or used by any pers the name and address of any political committee t | |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic S | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Debra J. Johnson MD | | Date of Receipt |
| Mailing Address 3500 Cutter Way | | 06 03 2013 |
| City | State Zip Code | Transaction ID : 4C3EBB7EBD5460E7CB8 |
| Sacramento | CA 95818-4442 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 100.00 |
| Name of Employer | Occupation | 1 |
| The Plastic Surgery Center | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 7 |
| Primary General | gg. sgato Tour to Date ▼ | |
| Other (specify) ▼ | 600.00 | <u></u> |
| Full Name (Last, First, Middle Initial) Ramasamy Kalimuthu MD | | Date of Receipt |
| Mailing Address 5346 W 95th St | | 05 28 _2013 _ |
| City | State Zip Code | U5 28 2013 Transaction ID : C7381111F7214D7F9D2A |
| Oak Lawn | IL 60453-2452 | Amount of Each Receipt this Period |
| FEC ID number of contributing | 00 100 2 102 | 1 |
| federal political committee. | C | 300.00 |
| Name of Employer | Occupation | |
| Self | Physician | _ |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 30 0 | |
| Other (specify) ▼ | 300.00 | |
| Full Name (Last, First, Middle Initial) C. Dean P. Kane MD | | Date of Receipt |
| Mailing Address 1 Reservoir Cir Ste 201 | | 05 22 _2013 _ |
| City | State Zip Code | Transaction ID : C1F8A9FA-C7F5-4DF6- |
| Baltimore | MD 21208-6413 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | 1 |
| The Center for Anti- Aging Medicine & | Physician | 4 |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 300.00 | |
| Other (specify) ▼ | 300.00 | |
| SUBTOTAL of Receipts This Page (ontional) | | 700.00 |
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| | the name and address of any political committee t | to solicit contributions from such committee. | | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic St | urgeons PLASTYPAC | | | |
| Full Name (Last, First, Middle Initial) Daniel Kapp MD | Date of Receipt | | | |
| Mailing Address 1500 N Dixie Hwy Ste 304 | 03 12 2013 | | | |
| City West Palm Beach | State Zip Code FL 33401-2717 | Transaction ID : EC77472243E51115D95 | | |
| FEC ID number of contributing federal political committee. | C 33401-2717 | Amount of Each Receipt this Period 370.00 | | |
| Name of Employer Self | Occupation Physician | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 370.00 | | | |
| Full Name (Last, First, Middle Initial) Robert E. Kearney MD | Date of Receipt | | | |
| Mailing Address 4520 Executive Dr Ste 150 | | 03 19 2013 | | |
| City | State Zip Code | Transaction ID: 965BE88B-D741-4FFE- | | |
| San Diego | CA 92121-3084 | Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | С | 200.00 | | |
| Name of Employer Self | Occupation | | | |
| Receipt For: | Physician | _ | | |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | | | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt | | |
| Mailing Address 1936 Powder Mill Rd | 02 05 2013 | | | |
| City York | State Zip Code PA 17402-4744 | Transaction ID : E10A2C36-6E85-4AAB Amount of Each Receipt this Period | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | |
| Name of Employer | Occupation | + | | |
| Self | Physician | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | 250.00 | | | |
| SUBTOTAL of Receipts This Page (optional). | | 820.00 | | |
| TOTAL This Period (last page this line number | <u> </u> | | | |

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| | the name and address of any political committee t | | | | |
|---|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic Su | urgeons PLASTYPAC | | | | |
| Full Name (Last, First, Middle Initial) J. Woodfin Kennedy MD | | Date of Receipt | | | |
| Mailing Address 979 E 3rd St Ste C920 | 05 20 2013 | | | | |
| City | State Zip Code | Transaction ID: 78B2ABEE-B6EA-48B0- | | | |
| Chattanooga | TN 37403-2136 | _ Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | 500.00 | | | |
| Name of Employer | Occupation | 1 | | | |
| Self | Physician |] | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | |
| Primary General Other (specify) ▼ | 500.00 | | | | |
| Full Name (Last, First, Middle Initial) Geoffrey R. Keyes MD | · | Date of Receipt | | | |
| Mailing Address 9201 W Sunset Blvd | | M = M / D = D / Y = Y = Y | | | |
| Ste 611 City | State Zip Code | 06 18 2013 | | | |
| Los Angeles | CA 90069-3707 | Transaction ID: 9764C32082604A30A7CB | | | |
| FEC ID number of contributing | | Amount of Each Receipt this Period | | | |
| federal political committee. | C | 300.00 | | | |
| Name of Employer | Occupation |] | | | |
| Self | Physician | 4 | | | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | | | | |
| Other (specify) ▼ | 300.00 | | | | |
| Full Name (Last, First, Middle Initial) C. Robert M. Kimmel MD | • | Date of Receipt | | | |
| Mailing Address 575 E Norwegian St | | | | | |
| City | State Zip Code | 05 23 2013 Transaction ID : 0E348F73-06DF-440D- | | | |
| Pottsville | PA 17901-3711 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | |
| Name of Employer | Occupation | † | | | |
| Keystone Cosmetic Surgery Center | Physician | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 | | | |
| Primary General Other (specify) ▼ | 250.00 | | | | |
| SUBTOTAL of Receipts This Page (optional) | > | 1050.00 | | | |
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88

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Brian M. Kinney MD, FACS Date of Receipt Mailing Address 120 S Spalding Dr Ste 330 2013 26 City State Zip Code Transaction ID: 80863CF6-9DBA-488F-CA Beverly Hills 90212-1841 Amount of Each Receipt this Period FEC ID number of contributing 3000.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) B. David S. Kirn MD Date of Receipt Mailing Address 2376 Alexandria Dr 02 05 2013 City State Zip Code Transaction ID: 0F724E9460EBB99E218 KY Lexington 40504-3229 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) W. John Kitzmiller MD Date of Receipt Mailing Address 231 Albert Sabin Way 09 05 2013 MI0558 City State Zip Code Transaction ID: 68CA7BB3-B855-447F-OH Cincinnati 45267-2827 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Univ/Cincinnati Plas Recon & Hand Surg Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 4300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| | ng the name and address of any political committee | |
|--|--|---|
| NAME OF COMMITTEE (In Full) | Surgoons DI ASTVDAC | |
| American Society of Plastic | Surgeons PLAST TPAC | |
| Full Name (Last, First, Middle Initial) A. Brian Kobienia MD | | Date of Receipt |
| Mailing Address 7450 France Ave S Ste 220 | | 06 11 2013 |
| City | State Zip Code | Transaction ID : 06941DAFC50B4849A93B |
| Edina | MN 55435-4792 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 450.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 450.00 | |
| Full Name (Last, First, Middle Initial) 3. Andrew N. Kornstein MD | Date of Receipt | |
| Mailing Address 1373 Redding Rd | M = M / D = D / Y = Y = Y | |
| City | 05 08 2013 Transaction ID : 986139099554005898 | |
| Fairfield | State Zip Code CT 06824-1956 | Transaction ID: 8B6138D98FF54DD5B8B6 Amount of Each Receipt this Period |
| FEC ID number of contributing | | . and the Edon Hoodpi tills I chou |
| federal political committee. | C | 250.00 |
| Name of Employer | Occupation | - |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Mark L. Labowe MD | | Data of Danaint |
| Mailing Address 100 Ucla Medical Plz | | Date of Receipt |
| Ste 747 | | 02 222013 |
| City | State Zip Code | Transaction ID : BC2B4A2F-DCD8-492F- |
| Los Angeles | CA 90024-6990 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | _ |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| SUBTOTAL of Receipts This Page (option | al) | 950.00 |
| (option | | |
| TOTAL This Period (last page this line nu | mber only) | |

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| | the name and address of any political committee to | | | | | |
|---|--|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic S | Surgeons PLASTYPAC | | | | | |
| Full Name (Last, First, Middle Initial) David C. Leber MD Mailing Address 2807 N Front St | | Date of Receipt | | | | |
| | | 03 27 2013 | | | | |
| City Harrisburg | State Zip Code PA 17110-1222 | Transaction ID : F0568231F63F4A33B9 | | | | |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 250.00 | | | | |
| Name of Employer Leber & Banducci Plastic Surgery, LTD | Occupation Physician | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | | | | |
| Full Name (Last, First, Middle Initial) Gilbert W. Lee MD | | Date of Receipt | | | | |
| Mailing Address 11515 El Camino Real Ste 150 | 04 23 2013 | | | | | |
| City San Diego | State Zip Code CA 92130-3037 | Transaction ID: 18346E0F-072A-4D41- Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer Self | Occupation Physician | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | | | | |
| Full Name (Last, First, Middle Initial) . Wayne C. Lee MD | | Date of Receipt | | | | |
| Mailing Address 1602 Oakfield Dr Ste 109 | | 04 15 2013 | | | | |
| City Brandon | State Zip Code FL 33511-0827 | Transaction ID : BEE09F4C-9F9B-47BF Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer Self | Occupation Physician | | | | | |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ | | | | | |
| SUBTOTAL of Receipts This Page (optional |) | 750.00 | | | | |
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| | Statements may not be sold or used by any persone name and address of any political committee to | |
|--|--|---|
| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Su | rgeons PLASTYPAC | |
| , | <u>-</u> | |
| Full Name (Last, First, Middle Initial) E. Dwayne Lett MD | | Data of Pagaint |
| | | Date of Receipt |
| Mailing Address 1417 W Baddour Pkwy Ste B | | 06 11 _ 2013 _ |
| City | State Zip Code | 06 11 2013 Transaction ID : 94D829DC-487D-45FE- |
| Lebanon | TN 37087-3064 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | |
| federal political committee. | C | 250.00 |
| · | Occupation | |
| Name of Employer | Occupation | |
| The Lett Center Receipt For: | Physician | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) | 250.00 | |
| Culoi (opeoliy) ▼ | 255.00 | |
| Full Name (Last, First, Middle Initial) | ' | |
| 3. Thomas B. Lintner MD | I | Date of Receipt |
| Mailing Address 711 Canton Rd NE | | M = M / D = D / Y = Y = Y |
| Ste 400 | | 05 02 2013 |
| City | State Zip Code | Transaction ID: 980E8EF9-1B37-4C1F- |
| Marietta | GA 30060-8949 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | |
| federal political committee. | C | 300.00 |
| | Occupation | |
| Name of Employer Self | Occupation | |
| Receipt For: | Physician | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) | 300.00 | |
| | | |
| Full Name (Last, First, Middle Initial) | ' | |
| Ronald A. Lohner MD | | Date of Receipt |
| Mailing Address Building I Suite 200 | | M = M / D = D / Y = Y = Y |
| | | 03 14 2013 |
| City | State Zip Code | Transaction ID : F23E86DC7631485B30E |
| Rosemont | PA 19010 | Amount of Each Receipt this Period |
| FEC ID number of contributing | C | 250.00 |
| federal political committee. | <u> </u> | 255.00 |
| Name of Employer | Occupation | |
| Self | | |
| Receipt For: | Physician Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
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| NAME OF COMMITTEE (In Full) | ng the name and address of any political committee | to solicit contributions from such committee. | | | | | |
|---|--|---|--|--|--|--|--|
| American Society of Plastic | Surgeons PLASTYPAC | | | | | | |
| Full Name (Last, First, Middle Initial) Paul J. Loverme MD, FACS | Paul J. Loverme MD, FACS | | | | | | |
| Mailing Address 3 Brook Ridge Ct | | 06 29 2013 | | | | | |
| City | State Zip Code | Transaction ID: 4B5DB38B31A4CBA31. | | | | | |
| Cedar Grove | NJ 07009-1641 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 50.00 | | | | | |
| Name of Employer | Occupation | \dashv | | | | | |
| Self | Physician | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | |
| Primary General | | | | | | | |
| Other (specify) ▼ | 250.00 | | | | | | |
| Full Name (Last, First, Middle Initial) Paul J. Loverme MD, FACS | Date of Receipt | | | | | | |
| Mailing Address 3 Brook Ridge Ct | 06 29 _2013 _ | | | | | | |
| City | State Zip Code | Transaction ID : 44A697A0E5685019470 | | | | | |
| Cedar Grove | NJ 07009-1641 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 50.00 | | | | | |
| Name of Employer | Occupation | \dashv | | | | | |
| Self | Physician | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | \dashv | | | | | |
| Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| . Herluf G. Lund MD | | Date of Receipt | | | | | |
| Mailing Address 17300 N Outer 40 Rd Ste 300 | | 03 08 2013 | | | | | |
| City Wildwood | State Zip Code MO 63005-1364 | Transaction ID : A3AFC21E3476499890 | | | | | |
| | 33003 1007 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | | |
| Name of Employer | Occupation | _ | | | | | |
| St. Louis Cosmetic Surgery | Physician | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | |
| Primary General | | | | | | | |
| Other (specify) ▼ | 250.00 | | | | | | |
| SUBTOTAL of Receipts This Page (option | nal) | 350.00 | | | | | |
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| Jse separate schedule(s) or each category of the | | (check only one) | | | | | | | | |
| or each category of the Detailed Summary Page | <u> </u> | K 11a | | 11b | | 11c | | 12 | | |
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| | Statements may not be sold or used by any pers e name and address of any political committee to | |
|---|---|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic Su | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Dennis J. Lynch MD Mailing Address 2361 River Ranch Rd | | Date of Receipt |
| City Temple | State Zip Code TX 76502-4260 | 05 02 2013 Transaction ID: 6D7E842712E94B84B81A Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Self Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) Matthew Lynch MD Mailing Address 300B Princeton Hightstown F Ste 101 | Rd | Date of Receipt 03 26 2013 |
| City East Windsor | State Zip Code NJ 08520-1400 | Transaction ID : 6C723AB7-0C2B-446D- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 370.00 |
| Name of Employer Self Receipt For: | Occupation Physician Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 370.00 | |
| Full Name (Last, First, Middle Initial) Raman Chaos Mahabir MD Mailing Address Division of Plastic Surgery | | Date of Receipt |
| City Temple | State Zip Code TX 76508-0001 | 02 21 2013 Transaction ID: 66D4A949719BEDBC78A Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer Self Beceipt For: | Occupation Associate Professor | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |
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| | I Statements may not be sold or used by any pers the name and address of any political committee to | | | | | | |
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| NAME OF COMMITTEE (In Full) | , , , , , , , , , , , , , , , | | | | | | |
| American Society of Plastic Su | urgeons PLASTYPAC | | | | | | |
| / | | | | | | | |
| Full Name (Last, First, Middle Initial) A. Philip C. Marin MD | | Date of Receipt | | | | | |
| Mailing Address 650 Dittmer Ave | | Date of Receipt | | | | | |
| Maining Address 650 DIMITIEI AVE | | 01 30 2013 | | | | | |
| City | State Zip Code | Transaction ID : D062A30C-3CE6-4A1F- | | | | | |
| Pueblo | CO 81005-1212 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing | C | 250.00 | | | | | |
| federal political committee. | 9 | 250.00 | | | | | |
| Name of Employer | Occupation | 1 | | | | | |
| Self | Physician | | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | | |
| Primary General Other (specify) ▼ | 250.00 | | | | | | |
| Cuter (specify) | 230.00 | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| B. Eric R. Mariotti MD | | Date of Receipt | | | | | |
| Mailing Address 2222 East St | M = M / D = D / Y = Y = Y | | | | | | |
| Ste 310 | State Zip Code | 03 19 2013 | | | | | |
| City Concord | State Zip Code CA 94520-2055 | Transaction ID: 91F1667111F94B968338 | | | | | |
| | | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | | |
| | Occupation | | | | | | |
| Name of Employer Self | Occupation | | | | | | |
| Receipt For: | Physician | - | | | | | |
| Primary General | Aggregate Year-to-Date ▼ | | | | | | |
| Other (specify) ▼ | 250.00 | | | | | | |
| | | | | | | | |
| Full Name (Last, First, Middle Initial) Thomas B. McNemar MD | | Date of Receipt | | | | | |
| Mailing Address 2160 W Grant Line Rd | | Date of neceipt | | | | | |
| Ste 250 | | 02 12 2013 | | | | | |
| City | State Zip Code | Transaction ID : F6C7C16FF7BB9AD638C | | | | | |
| Tracy | CA 95377-7335 | Amount of Each Receipt this Period | | | | | |
| FEC ID number of contributing | C | 1000.00 | | | | | |
| federal political committee. | | | | | | | |
| Name of Employer | Occupation | | | | | | |
| Self | Pagaint For: | | | | | | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | | | | | | |
| Other (specify) | 1000.00 | | | | | | |
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| | statements may not be sold or used by any persole name and address of any political committee to | | | | | |
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| NAME OF COMMITTEE (In Full) | | | | | | |
| American Society of Plastic Sur | geons PLASTYPAC | | | | | |
| Full Name (Last, First, Middle Initial) Constantino Mendieta MD | Constantino Mendieta MD | | | | | |
| Mailing Address 2310 S Dixie Hwy | | 03 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| City | State Zip Code | Transaction ID: 2D36278D362143999983 | | | | |
| Miami | FL 33133-2314 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | 00 0 | | | | | |
| Other (specify) ▼ | 250.00 | | | | | |
| Full Name (Last, First, Middle Initial) William D. Merkel MD | | Date of Receipt | | | | |
| Mailing Address 2525 N 8th St | | M = M / D = D / Y = Y = Y | | | | |
| Ste 203 | | 04 17 2013 | | | | |
| City | State Zip Code | Transaction ID: 71818610B5624F7285CE | | | | |
| Grand Junction | CO 81501-8847 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | 00 0 | | | | | |
| Other (specify) ▼ | 250.00 | | | | | |
| Full Name (Last, First, Middle Initial) Basil M. Michaels MD | | Date of Receipt | | | | |
| Mailing Address 426 South St | | 03 13 2013 | | | | |
| City | State Zip Code | Transaction ID : C432237E-6263-4E08- | | | | |
| Pittsfield | MA 01201-8228 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | Aggregate rear-to-Date ▼ | | | | | |
| Other (specify) ▼ | 250.00 | | | | | |
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| or for commercial purposes, other than usi | ng the name and address of any political committee | | | | | |
|--|--|---|--|--|--|--|
| NAME OF COMMITTEE (In Full) American Society of Plastic | Surgeons PLASTYPAC | | | | | |
| Full Name (Last, First, Middle Initial) A. Paul B. Mills MD | | | | | | |
| Mailing Address 145 Saint Peters Centre | e Blvd | Date of Receipt 0,1 31 2013 | | | | |
| City | State Zip Code | Transaction ID : E3850498-4F4F-432F- | | | | |
| Saint Peters | MO 63376-5103 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 500.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Renaissance Plastic Surgery | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General Other (specify) ▼ | 500.00 | | | | | |
| Full Name (Last, First, Middle Initial) 3. Brent R.W Moelleken MD | ' | Date of Receipt | | | | |
| Mailing Address 120 S Spalding Dr | | | | | | |
| Ste 110 City | State Zip Code | 06 24 2013 | | | | |
| Beverly Hills | CA 90212-1830 | Transaction ID: 7A7FD0C42A7B4BAFB79 Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing | C 30212 1000 | Amount of Lacii necelpt this Period | | | | |
| federal political committee. | 250.00 | | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | _ | | | | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | | | | | |
| Other (specify) | 250.00 | | | | | |
| Full Name (Last, First, Middle Initial) C. Talal A. Munasifi MD | | Date of Receipt | | | | |
| Mailing Address 1635 N George Mason Ste 380 | | 03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| City Arlington | State Zip Code VA 22205-3616 | Transaction ID : 6F4E482C158F4C9FA5B | | | | |
| | 22203-3010 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 500.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General Other (specify) ▼ | 500.00 | | | | | |
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| | the name and address of any political committee | |
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| American Society of Plastic St | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Lisa C. Murcko MD Mailing Address 1700 S Lincoln Ave Va Medical Center | | Date of Receipt 02 21 2013 |
| City Lebanon FEC ID number of contributing | State Zip Code PA 17042-7529 | Transaction ID : A5FE59E5513FFD51EB Amount of Each Receipt this Period 500.00 |
| federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 500.00 | 300.00 |
| Full Name (Last, First, Middle Initial) Robert X. Murphy Jr., MD Mailing Address 2597 Schoenersville Rd Ste 305 City Bethlehem FEC ID number of contributing federal political committee. Name of Employer | State Zip Code PA 18017-7331 C Occupation | Date of Receipt 04 17 2013 Transaction ID: 227940FF-CB20-41DA- Amount of Each Receipt this Period 500.00 |
| Cosmetic and Reconstructive Specialist Receipt For: Primary General Other (specify) ▼ | Physician Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) John D. Murray MD Mailing Address 4555 Emerson St Ste 230 City Jacksonville FEC ID number of contributing federal political committee. Name of Employer | State Zip Code FL 32207-4958 C Occupation | Date of Receipt 05 02 2013 Transaction ID: 5FC68C84-C4D5-4375- Amount of Each Receipt this Period 250.00 |
| Self Receipt For: Primary General Other (specify) ▼ | Physician Aggregate Year-to-Date ▼ 250.00 | |
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| or for commercial purposes, other than using the | ne name and address of any political committee to | solicit contributions from such committee. |
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| NAME OF COMMITTEE (In Full) American Society of Plastic Su | ırgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Yukihiro A. Nakamura MD | | Date of Receipt |
| Mailing Address 3030 S Cooper St Accent on You-Cosmetic Su City | State Zip Code | 03 27 2013 Transaction ID : C8626FA4611445DBA803 |
| Arlington FEC ID number of contributing federal political committee. | TX 76015-2323 | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) Herbert J. Nassour MD Mailing Address 1300 Murchison Dr Ste 300 | | Date of Receipt 04 23 2013 |
| City El Paso FEC ID number of contributing federal political committee. | State Zip Code TX 79902-4851 | Transaction ID: 7B500D38623B428296B0 Amount of Each Receipt this Period 250.00 |
| Name of Employer Self Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) Morgan E. Norris MD Mailing Address 6906 Sewanee St | | Date of Receipt |
| City Houston FEC ID number of contributing | State Zip Code TX 77025-1348 | 06 02 2013 Transaction ID: 4F29B0A1E86EF8756D44 Amount of Each Receipt this Period 150.00 |
| federal political committee. Name of Employer Self Receipt For: □ Primary □ General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 300.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 650.00 |
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| or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) | ng the name and address of any political committee to | | | | | |
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| American Society of Plastic | Surgeons PLASTYPAC | | | | | |
| Full Name (Last, First, Middle Initial) Kenneth L. Odinet MD | | Date of Receipt | | | | |
| Mailing Address 200 Beaullieu Dr Ste 6 | | 06 04 2013 | | | | |
| City | State Zip Code | Transaction ID: 03420609-B42F-4284- | | | | |
| Lafayette | LA 70508-7230 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 500.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | - | | | | |
| Primary General | riggrogato roar to bate v | | | | | |
| Other (specify) ▼ | 500.00 | | | | | |
| Full Name (Last, First, Middle Initial) Richard R. Orr MD | · · · · · · · · · · · · · · · · · · · | | | | | |
| Mailing Address 3700 Bellemeade Ave | M = M / D = D / Y = Y = Y | | | | | |
| Medical Arts Building, S | | 03 27 2013 | | | | |
| City | State Zip Code | Transaction ID: 6800278FED8549E3820E | | | | |
| Evansville | IN 47714-0102 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 300.00 | | | | |
| Name of Employer | Occupation | 1 | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 | | | | |
| Primary General Other (specify) ▼ | 300.00 | | | | | |
| Full Name (Last, First, Middle Initial) 2. John M. Osborn MD | | Date of Receipt | | | | |
| Mailing Address 95 Scripps Dr Downstairs | | 02 21 2013 | | | | |
| City | State Zip Code | Transaction ID : CFD03DFBB6A4391A09 | | | | |
| Sacramento | CA 95825-6320 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | С | 300.00 | | | | |
| Name of Employer | Occupation | 1 | | | | |
| Self | Physician | | | | | |
| Receipt For: | | - | | | | |
| Primary General | Aggregate Year-to-Date ▼ | | | | | |
| Other (specify) | 300.00 | | | | | |
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| or for commercial purposes, other than using the | name and address of any political committee to | solicit contributions from such committee. |
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| NAME OF COMMITTEE (In Full) American Society of Plastic Surg | geons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Steven E. Ozeran MD | | Date of Receipt |
| Mailing Address 1630 23rd Ave Ste 901A | | 03 19 2013 |
| City | State Zip Code | Transaction ID: 63AEE4AB2B4744A392E5 |
| Lewiston | ID 83501-6358 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Michael J. Pecoraro MD | | Date of Receipt |
| Mailing Address 450 Jack Martin Blvd | | M = M / D = D / Y = Y = Y |
| Ste A | State 7in Code | 02 21 2013 |
| City | State Zip Code | Transaction ID: 77A45237B6F6342BAAC |
| Brick | NJ 08724-7779 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. George J. Picha MD, Ph.D. | | Date of Receipt |
| Mailing Address 5005 Rockside Rd Ste 1225 | | 05 23 _ 2013 _ |
| City | State Zip Code | Transaction ID : 5DEF97E1FE664CBDB640 |
| Independence | OH 44131-6809 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | . agrogato Tour to Date ▼ | |
| Other (specify) ▼ | 250.00 | |
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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Susan M. Pike MD Date of Receipt Mailing Address 302 University Blvd 2013 City State Zip Code Transaction ID: BB1E75A888E2E9CA28C TX Round Rock 78665-1032 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Byron D. Poindexter MD Date of Receipt Mailing Address 1825 Samuel Morse Dr 05 80 2013 City State Zip Code Transaction ID: 66BAAA168E9243CDA510 VA Reston 20190-5317 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Harlan Pollock MD Date of Receipt Mailing Address 8305 Walnut Hill Ln 04 25 2013 Ste 210 City State Zip Code Transaction ID: 64EB8C16-1CC6-4036-TX **Dallas** 75231-4203 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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| | the name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic S | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Patrick H. Pownell MD Mailing Address 7115 Greenville Ave Ste 220 City Dallas FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code TX 75231-5105 C Occupation Physician Aggregate Year-to-Date ▼ 400.00 | Date of Receipt 04 11 2013 Transaction ID: 3AE58BD5423A423D911 Amount of Each Receipt this Period 200.00 |
| Full Name (Last, First, Middle Initial) David F. Pratt MD Mailing Address 10413 NE 37th Cir Bldg B City Kirkland FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) | State Zip Code WA 98033-7924 C Occupation Physician Aggregate Year-to-Date ▼ 1000.00 | Date of Receipt 06 04 2013 Transaction ID: 03BD16E5-333A-4181- Amount of Each Receipt this Period 1000.00 |
| Full Name (Last, First, Middle Initial) Brian Reedy MD Mailing Address 50 Commerce Dr City Wyomissing FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code PA 19610-3335 C Occupation Physician Aggregate Year-to-Date ▼ 500.00 | Date of Receipt M M M / 23 2013 Transaction ID: 00971C7D73F24D4E99C Amount of Each Receipt this Period 500.00 |
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| or for commercial purposes, other than using | the name and address of any political committee to | o solicit contributions from such committee. | | | | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic S | Surgeons PLASTYPAC | | | | | |
| Full Name (Last, First, Middle Initial) Andre J. Renard MD | | Date of Receipt | | | | |
| Mailing Address 2401 University Pkwy Ste 204 | 01 04 2013 | | | | | |
| City | State Zip Code | Transaction ID : EAEB9B006B6D36C41C7 | | | | |
| Sarasota | FL 34243-2973 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General Other (specify) ▼ | 500.00 | | | | | |
| Full Name (Last, First, Middle Initial) Andre J. Renard MD | Date of Receipt | | | | | |
| Mailing Address 2401 University Pkwy | | | | | | |
| Ste 204 City | State Zip Code | 01 25 2013 Transaction ID : SDRES ASSOCIATION SPE | | | | |
| Sarasota | FL 34243-2973 | Transaction ID: 6DBE6A68CCD60DD6BE Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing | | Amount of Each Hoodpt this Follow | | | | |
| federal political committee. | C | 250.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General | | | | | | |
| Other (specify) ▼ | 500.00 | | | | | |
| Full Name (Last, First, Middle Initial) James N. Romanelli MD | | Date of Receipt | | | | |
| Mailing Address 110 E Main St Ste 6 | | 03 12 2013 | | | | |
| City Huntington | State Zip Code NY 11743-2845 | Transaction ID : 7CC2B8677973E211D86 | | | | |
| FEC ID number of contributing | C | Amount of Each Receipt this Period | | | | |
| federal political committee. | 0 | 1000.00 | | | | |
| Name of Employer | Occupation | | | | | |
| Self | Physician | | | | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | | | | |
| Primary General Other (specify) ▼ | 1000.00 | | | | | |
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| | ng the name and address of any political committee t | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic | Surgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) David A. Ross MD Mailing Address 875 N Rush St | | Date of Receipt |
| | State 7in Code | 06 28 2013 |
| City Chicago | State Zip Code IL 60611-2030 | Transaction ID : C55CD4FD-7783-4ACD- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Self | Occupation Physician | - |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) Leonard A. Roudner MD | Date of Receipt | |
| Mailing Address 550 Biltmore Way Ste 890 | 7. 2. | 05 15 2013 |
| City Coral Gables | State Zip Code FL 33134-5779 | Transaction ID: 9A732055BBE94829A7I Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer Self | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| Mailing Address 603 S Boulevard | | 04 23 2013 |
| City Tampa | State Zip Code FL 33606-2629 | Transaction ID : 5CA649950E6A40CEA7 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer Self | Occupation Physician | - |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | - |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Su | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) 1. Justin M. Sacks MD | | Date of Receipt |
| Mailing Address 601 N Caroline St Ste 8140D | | 03 26 2013 |
| City | State Zip Code | Transaction ID : F8926888-1A5F-4713- |
| Baltimore | MD 21287-0006 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | - |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) Marc J. Salzman MD | • | Date of Receipt |
| Mailing Address 6420 Dutchmans Pkwy | M = M / D = D / Y = Y = Y | |
| Ste 160 | State 7:- On-d- | 04 25 2013 |
| City | State Zip Code | Transaction ID : E2C09524-F888-4CBE- |
| Louisville | KY 40205-3353 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) C. George H. Sanders MD | • | Date of Receipt |
| Mailing Address 16633 Ventura Blvd Ste 110 | | 04 05 2013 |
| City | State Zip Code | Transaction ID : D33A0E3C70CF464C868A |
| Encino | CA 91436-1834 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| or | for commercial purposes, other than using the | name and address of any political committee to | solicit contributions from such committee. |
|-----------|--|---|--|
| \rangle | NAME OF COMMITTEE (In Full) American Society of Plastic Sur | geons PLASTYPAC | |
| A. | Full Name (Last, First, Middle Initial) Gordon H. Sasaki MD Mailing Address 800 Fairmount Ave Ste 319 City Pasadena FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) | State Zip Code CA 91105-3153 C Occupation Physician Aggregate Year-to-Date ▼ 500.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | S. Larry Schlesinger MD Mailing Address 1221 Kapiolani Blvd Ste 1025 City Honolulu FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code HI 96814-3517 C Occupation Physician Aggregate Year-to-Date ▼ | Date of Receipt M |
| - | Full Name (Last, First, Middle Initial) Peter L. Schwartz MD Mailing Address 143 Froehlich Farm Blvd City Woodbury FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code NY 11797-2906 C Occupation Physician Aggregate Year-to-Date ▼ 300.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
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| | Statements may not be sold or used by any pers he name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic Society | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Robert K. Sigal MD | | Date of Receipt |
| Mailing Address 1825 Samuel Morse Dr | | 05 08 2013 |
| City | State Zip Code | Transaction ID : CC66437C284F4359B2E2 |
| Reston | VA 20190-5317 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Self | Medical Director | |
| Receipt For: Primary General | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) 3. Sumner A. Slavin MD | • | Date of Receipt |
| Mailing Address 1101 Beacon St | | 05 14 2013 |
| City | State Zip Code | Transaction ID : 028EC4B9-2680-482A- |
| Brookline | MA 02446-5536 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) 2. Jeffrey Dean Smith MD | | Date of Receipt |
| Mailing Address 15 Village Sq | | 06 11 2013 |
| City Chelmsford | State Zip Code MA 01824-2712 | Transaction ID : 589B2051-8B71-4ADE- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | - |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
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| | I Statements may not be sold or used by any pers the name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Society | urgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Lisa Lynn Sowder MD | | Date of Receipt |
| Mailing Address 901 Boren Ave Ste 1650 | | 01 30 2013 |
| City | State Zip Code | Transaction ID : 505E057C-35F0-4471- |
| Seattle | WA 98104-3508 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 00 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) David R. Stephens MD | | Date of Receipt |
| Mailing Address 10687 NE 2nd St | | 05 22 _2013 _ |
| City | State Zip Code | Transaction ID : 7A47651CC8E048378C41 |
| Bellevue | WA 98004-5727 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 250.00 |
| Name of Employer | Occupation | 1 |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) C. Steven K. Struck MD | • | Date of Receipt |
| Mailing Address 3301 El Camino Real Ste 200 | | 03 19 2013 |
| City | State Zip Code | Transaction ID : 6AB38F0308E643AE94BD |
| Atherton | CA 94027-3803 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 400.00 |
| Name of Employer | Occupation | - |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 400.00 | |
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88 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Gregory M. Swank MD Date of Receipt Mailing Address 5141 Hurricane Hill Rd 2013 21 City Zip Code State Transaction ID: 4782B37EB323EB016F7F NC 28630-8384 Granite Falls Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Piedmont Plastic Surgery & Dermatology Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mia Talmor MD Date of Receipt Mailing Address 425 E 61st St FI 10 06 2013 11 City State Zip Code Transaction ID: 30A5F72AAF4446359EFB NY New York 10065-8722 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Anne Taylor MD Date of Receipt Mailing Address 2 Easton Oval 80 04 2013 Ste 545 City Zip Code State Transaction ID: 0C2F2628-C97B-442D-OH Columbus 43219-8032 Amount of Each Receipt this Period FEC ID number of contributing 3000.00 С federal political committee. Name of Employer Occupation Ohio State University - Plastic Surger Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) 4250.00 SUBTOTAL of Receipts This Page (optional).....

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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Sur | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Kevin Tehrani MD | | Date of Receipt |
| Mailing Address 560 Northern Blvd | | M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y |
| Ste 109 City | State Zip Code | 05 21 2013 Transaction ID: 42AB899F552B37FAD33F |
| Great Neck | NY 10021 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Sarvam P. Terkonda MD | | Date of Receipt |
| Mailing Address 4500 San Pablo Rd S | | 03 16 _ 2013 _ |
| City | State Zip Code | Transaction ID : C8268D47-F090-4830- |
| Jacksonville | FL 32224-1865 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | |
| federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Mayo Clinic Jacksonville | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Christopher K. Tiner MD | | Date of Receipt |
| Mailing Address 1044 S Fair Oaks Ave | | M = M / D = D / Y = Y = Y |
| Ste 101 City | State Zip Code | 01 11 2013 |
| Pasadena | CA 91105-2622 | Transaction ID: 20255030EB74B2A3C2B Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 500.00 | |
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Scott L. Tucker MD Date of Receipt Mailing Address 1345 Westgate Center Dr Ste A 04 05 2013 City Zip Code State Transaction ID: FFDD4522-64F0-4AA3-NC Winston Salem 27103-3041 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Anthony P. Tufaro MD Date of Receipt Mailing Address McElderry 8130-D 02 05 2013 City State Zip Code Transaction ID: 5FD7D5653DE5FF2AAEF MD **Baltimore** 21287-0001 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ivan M. Turpin MD Date of Receipt Mailing Address 1310 W Stewart Dr 30 01 2013 Ste 610 City State Zip Code Transaction ID: BF10807BEA5DDF64602 CA Orange 92868-3857 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Su | rgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Todd M. Van Ye MD | | Date of Receipt |
| Mailing Address 425 S Commercial St | | 06 04 2013 |
| City Neenah | State Zip Code WI 54956-2526 | Transaction ID : 81A592DA-FD0F-42DA- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer The Center for Aesthetics & Plastic Su Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 250.00 | |
| Full Name (Last, First, Middle Initial) B. Paul F. Vanek MD | | Date of Receipt |
| Mailing Address 9485 Mentor Ave Ste 100 City Mentor FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) ▼ | State Zip Code OH 44060-8722 C Occupation Physician Aggregate Year-to-Date ▼ 500.00 | 03 22 2013 Transaction ID: 7FE9E6F824B14A7AA408 Amount of Each Receipt this Period 500.00 |
| Full Name (Last, First, Middle Initial) Bhupesh Vasisht MD Mailing Address 1307 White Horse Rd E-501 City Voorhees | State Zip Code NJ 08043-2176 | Date of Receipt 03 15 2013 Transaction ID: 49694459-F438-4998- Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer South Shore Plastic Surgery Receipt For: Primary General Other (specify) ▼ | Occupation Physician Aggregate Year-to-Date ▼ 250.00 | |
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Ted R. Vaughn MD Date of Receipt Mailing Address 305A W Alexander Ave 2013 City Zip Code State Transaction ID: C9BB0663-7D69-4BF4-SC Greenwood 29646-4009 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Frank X. Venzara MD Date of Receipt Mailing Address 280 N Sykes Creek Pkwy 02 Ste A 05 2013 City State Zip Code Transaction ID: 47B5E3A642A7443F902F Merritt Island FL 32953-3491 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathleen A. Waldorf MD, FACS Date of Receipt Mailing Address 9775 SW Wilshire St 05 04 2013 Ste 200 City State Zip Code Transaction ID: A4CF94F9E48D4AD2BA70 OR Portland 97225-5067 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼

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| NAME OF COMMITTEE (In Full) American Society of Plastic S | Surgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Simeon H. Wall Jr.,MD Mailing Address 8600 Fern Ave | | Date of Receipt |
| City | State Zip Code | 02 12 2013 |
| Shreveport | LA 71105-5639 | Transaction ID : A7733475-C5E7-48F2- |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 750.00 |
| Name of Employer Self | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 | |
| Full Name (Last, First, Middle Initial) William A. Wallace MD, FACS Mailing Address 916 Alameda Ln | | Date of Receipt |
| Maining Address 916 Alameda Ln | | 05 17 _ 2013 _ |
| City | State Zip Code | Transaction ID : 471EA2D02D2026635337 |
| Saint Johns | FL 32259-6903 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 84.00 |
| Name of Employer Coastal Cosmetic Center | Occupation Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 336.00 | |
| Full Name (Last, First, Middle Initial) C. William A. Wallace MD, FACS | · | Date of Receipt |
| Mailing Address 916 Alameda Ln | | 06 17 2013 |
| City Saint Johns | State Zip Code FL 32259-6903 | Transaction ID: 4823B407D123F534610D Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 84.00 |
| Name of Employer | Occupation | 1 |
| Coastal Cosmetic Center | Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 336.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 918.00 |
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| | statements may not be sold or used by any person e name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | January political committee to | |
| American Society of Plastic Sur | geons PLASTYPAC | |
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| Full Name (Last, First, Middle Initial) A. Amy G. Wandel MD | | Date of Receipt |
| Mailing Address 2200 Sunrise Blvd | | M = M / D = D / Y = Y = Y |
| Ste 250 | | 03 26 2013 |
| City | State Zip Code | Transaction ID: 37B99365-25A9-437F- |
| Gold River | CA 95670-4378 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | |
| Mercy Medical Group | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | . agrogato rota to Dato V | |
| Other (specify) ▼ | 1000.00 | |
| Full Name (Last, First, Middle Initial) Paul R. Weiss MD | | Date of Receipt |
| Mailing Address 1049 5th Ave | | M = M / D = D / Y = Y = Y |
| Ste 2D | | 03 22 2013 |
| City | State Zip Code | Transaction ID: B8F7E832216C4DE2ADFD |
| New York | NY 10028-0115 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Frank Welsh MD | | Date of Receipt |
| Mailing Address 6200 Pfeiffer Rd Ste 320 | | 02 12 2013 |
| City | State Zip Code | Transaction ID : 5CB3F84BCAAC6CA0E95 |
| Montgomery | OH 45242-5861 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | | |
| Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 250.00 | |
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| | Statements may not be sold or used by any person e name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | , . | |
| American Society of Plastic Sur | geons PLASTYPAC | |
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| Full Name (Last, First, Middle Initial) A. Frederick G. Weniger MD | | Date of Receipt |
| Mailing Address 25 Clark Summit Dr | | M = M / D = D / Y = Y = Y |
| Ste F104 | | 03 26 2013 |
| City | State Zip Code | Transaction ID: 7F5369B5-EE82-435E- |
| Bluffton | SC 29910-4205 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | |
| | ' | |
| Self Receipt For: | Physician Pate 7 | |
| Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) | 500.00 | |
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| Full Name (Last, First, Middle Initial) 3. Bruce I. White MD | | Date of Receipt |
| Mailing Address 17300 N Outer 40 Rd | | M = M / D = D / Y = Y = Y |
| Ste 300 | | 05 08 2013 |
| City | State Zip Code | Transaction ID: 8A86549A-A538-4FCF- |
| Chesterfield | MO 63005-1364 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 500.00 |
| Name of Employer | Occupation | |
| St. Louis Cosmetic Surgery | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 0. 0 | |
| Other (specify) ▼ | 500.00 | |
| Full Name (Last, First, Middle Initial) | | Date of Director |
| Steven K. White MD | | Date of Receipt |
| Mailing Address 1275 21st Ave N | | 06 04 2013 |
| City | State Zip Code | Transaction ID : A11F9F3A-CD6B-4CE6- |
| Myrtle Beach | SC 29577-7514 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 1000.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | | |
| Primary General | Aggregate Year-to-Date ▼ | |
| Other (specify) ▼ | 1000.00 | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic Su | irgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Robert M. Whitfield MD, FACS Mailing Address 1510 W 34th St Ste 100 City Austin FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code TX 78703-1432 C Occupation Assistant Professor Aggregate Year-to-Date ▼ 999.96 | Date of Receipt 02 18 2013 Transaction ID: 4CF48C11BD167C5D467 Amount of Each Receipt this Period 166.66 |
| Full Name (Last, First, Middle Initial) Robert M. Whitfield MD, FACS Mailing Address 1510 W 34th St Ste 100 City Austin FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify) | State Zip Code TX 78703-1432 C Occupation Assistant Professor Aggregate Year-to-Date ▼ 999.96 | Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Robert M. Whitfield MD, FACS Mailing Address 1510 W 34th St Ste 100 City Austin FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) | State Zip Code TX 78703-1432 C Occupation Assistant Professor Aggregate Year-to-Date ▼ 999.96 | Date of Receipt 04 18 2013 Transaction ID: 4086B785D4F6EF6B8A4 Amount of Each Receipt this Period 166.66 |
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| NAME OF COMMITTEE (In Full) | <u> </u> | |
| American Society of Plastic Surg | geons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Robert M. Whitfield MD, FACS | | Date of Receipt |
| Mailing Address 1510 W 34th St Ste 100 | | 05 18 2013 |
| City | State Zip Code | Transaction ID : 48BEA48D53402C7D355B |
| Austin | TX 78703-1432 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 166.66 |
| Name of Employer | Occupation | |
| Self | Assistant Professor | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | 00 0 | |
| Other (specify) ▼ | 999.96 | |
| Full Name (Last, First, Middle Initial) Robert M. Whitfield MD, FACS | | Date of Receipt |
| Mailing Address 1510 W 34th St | | M = M / D = D / Y = Y = Y |
| Ste 100 | 000 | 06 18 2013 |
| City | State Zip Code | Transaction ID: 43C2956CDECBE024F8A9 |
| Austin | TX 78703-1432 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 166.66 |
| Name of Employer | Occupation | |
| Self | Assistant Professor | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 999.96 | |
| Full Name (Last, First, Middle Initial) C. Virgil V. Willard MD | | Date of Receipt |
| Mailing Address 1011 N Lindsay St | | Man / Dan / Yayayay |
| Ste 202 | | 06 11 2013 |
| City | State Zip Code | Transaction ID : 8A34DBC572CA44DCA5F |
| High Point | NC 27262-3945 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General | | |
| Other (specify) ▼ | 250.00 | |
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| or for commercial purposes, other than us | ing the name and address of any political committee | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic | Surgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) A. Natan Yaker MD | | Date of Receipt |
| Mailing Address 4100 W 15th St Ste 106 | | 02 12 2013 |
| City | State Zip Code | Transaction ID: 496588BF-CE9C-4A82- |
| Plano | TX 75093-5826 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 250.00 |
| Name of Employer | Occupation | _ |
| Self | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) Michael D. Yates MD | · | Date of Receipt |
| Mailing Address 303 Williams Ave SW Ste 1421 | | 03 12 2013 |
| City | State Zip Code | Transaction ID : 6D0DBA7146B9C33333E |
| Huntsville | AL 35801-6008 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 500.00 |
| Name of Employer | Occupation | 7 |
| Self | Physician | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |
| Full Name (Last, First, Middle Initial) | I | Date of Receipt |
| Mailing Address 5950 University Ave Ste 120 | | 04 11 2013 |
| City West Des Moines | State Zip Code IA 50266-8232 | Transaction ID : 16E1CE5E2DEA4D33A2E Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 300.00 |
| Name of Employer | Occupation | _ |
| The Iowa Clinic | Physician | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 300.00 | |
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| | Statements may not be sold or used by any persone name and address of any political committee to | |
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| NAME OF COMMITTEE (In Full) | | |
| American Society of Plastic Su | irgeons PLASTYPAC | |
| Full Name (Last, First, Middle Initial) Luis A. Zapiach MD | | Date of Receipt |
| Mailing Address 1 W Ridgewood Ave Ste 302 | | 05 14 2013 |
| City | State Zip Code | Transaction ID : 039AA230-19EC-4CD1- |
| Paramus | NJ 07652-2361 | Amount of Each Receipt this Period |
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| Name of Employer | Occupation | † |
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| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General | 0.0 | |
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| Full Name (Last, First, Middle Initial) George P. Zavitsanos MD | | Date of Receipt |
| Mailing Address 467 Pennsylvania Ave | | M = M / D = D / Y = Y = Y |
| Ste 203 | | 01 30 2013 |
| City | State Zip Code | Transaction ID: 30008C44C4DFD0D6CB1 |
| Fort Washington | PA 19034-3420 | Amount of Each Receipt this Period |
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| Primary General | 0.0 | |
| Other (specify) ▼ | 250.00 | |
| Full Name (Last, First, Middle Initial) C. H. Daniel Zegzula MD | | Date of Receipt |
| Mailing Address 1040 NW 22nd Ave Ste 610 | | 06 05 2013 |
| City | State Zip Code | Transaction ID: 9797E0C9-1276-4C0D- |
| Portland | OR 97210-3066 | Amount of Each Receipt this Period |
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| American Society of Plastic Surgeons PLASTYPAC FEN Name (Last, First, Middle Initial) A Richard J. Zienowicz MD Maiing Address Caste Hill Ave Usa U | or for commercial purposes, other than using | the name and address of any political committee to | solicit contributions from such committee. |
|--|---|--|---|
| A. Richard J. Zienowicz MD Mailing Address 1 Caste Hill Ave Usa City State City State City State City State City Name of Employer Self Primary General City State Zip Code Physician Receipt For: Primary City State Zip Code Physician Aggregate Year-to-Date Transaction ID : 48D9568/479789955811A2 Amount of Each Receipt this Period Amount of Each Receipt this Period Date of Receipt Transaction ID : 48D5568/479789955811A2 Amount of Each Receipt this Period Date of Receipt Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Date of Receipt Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/479789955811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Amount of Each Receipt this Period Transaction ID : 48D568/47978995811A2 Transaction ID : 48D568/47978995811A2 Transaction ID : 48D568/4798995811A2 Transaction ID : 48D568/4798995811A2 Transaction ID : 48D568/4798995811A2 Transaction ID : 48D568/479899581A2 Transaction ID : 48D568/4798995811A2 Transaction ID : 48D568/4798995811A2 Transaction ID : 48D568/4798995811A2 Transaction | | urgeons PLASTYPAC | |
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| Full Name (Last, First, Middle Initial) | | | | | | | | | | | |
| A. Alexander for Senate 2014 Inc | | | | M = M | / D | D / Y | | Y | | | |
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| Full Name (Last, First, Middle Initial) B. Allyson Schwartz for Congress Mailing Address PO Box 2232 | | | | M = M | / D | D / Y | | Y | | | |
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| Full Name (Last, First, Middle Initial) C. America Works PAC | | | | | _ | | | | | | |
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| A. An | dy Harris for Congress | | | Date of Disbursement |
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| ь. ва | rbara Lee for Congress | | | Date of Disbursement |
| Maili | ng Address 449 Fifteenth Street Suite 403 | | | 06 18 2013 |
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| C. Be | nishek for Congress, Inc. | | | Date of Disbursement |
| Maili | ng Address PO Box 108 | | | 05 28 2013 |
| City | | State Zip Code | | Transaction ID : A9DC1859DF13FBF16BC |
| | stone ose of Disbursement | MI 49837-0108 | | |
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| | didate Name Iniel J. Benishek | | Category/ | 2000.00 |
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| American Society of Plastic Surge | ons PLASTYPAC | | | |
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| Full Name (Last, First, Middle Initial) | | | | |
| A. Brady for Congress | | | Date of Disburseme | ent |
| Mailing Address PO Box 8277 | | | 06 18 | 2013 |
| Maining Address 1 O Box 6277 | | | 00 10 | 2010 |
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| the Woodlands | TX 77387-8277 | | Transaction iD . A | 100 IFF05CCESA/DC9AC |
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| Kevin Brady | | Category/ Type | | 2000.00 |
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| Senate | Primary General | | | |
| President | Other (specify) ▼ | | | |
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| Full Name (Last, First, Middle Initial) B. Bucshon for Congress | | | Date of Disburseme | unt |
| B. Bucshon for Congress | | | M M / D D | / |
| Mailing Address PO Box 250 | | | 05 28 | 2013 |
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| Newburgh Purpose of Disbursement | IN 47629 | | | |
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| Larry D. Bucshon | | Type | , | 2000.00 |
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| C. Cantor for Congress | | | Date of Disburseme | ent |
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| Mailing Address PO Box 17813 | | | 05 28 | 2013 |
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| A. | Capito for West Virginia | | | | Date of | f Disburser | ment | | |
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| | State: MA District: 07 | (-1 | · | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | |
| C. | Charles Boustany Jr. Md for Congr | ess, Inc. | | | | f Disburser | | | |
| | Mailing Address PO Box 80126 | | | | M M M | / D 28 | | y | Υ |
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| | Charles W. Boustany Jr. | | | Type | | - | | 2000 | .00 |
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| | Mailing Address PO Box 442 | | | 05 28 | 2013 | | |
| | City | State Zip Code | | | | | |
| | Allentown | PA 18105 | | Transaction ID: 37E | 29A62D4F408716E8 | | |
| | Purpose of Disbursement 2014 Primary | | <u>''</u> | | | | |
| | Candidate Name | | 011 | Amount of Each Disbu | rsement this Period | | |
| | Charles W. Dent | | Category/ Type | | 2000.00 | | |
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| | Senate | Primary General | | | | | |
| | | Other (specify) ▼ | | | | | |
| _ | State: PA District: 15 | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Chris Coons for Delaware | | | Date of Disbursement | | | |
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| | Mailing Address PO Box 9900 | | 06 18 | 2013 | | | |
| | | State Zip Code DE 19714 | | Transaction ID : 5A6 | F10392A625D4152C | | |
| | Newark Purpose of Disbursement | 19/14 | | | | | |
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| C. | Cole for Congress | | | Date of Disbursement | | | |
| | Mailing Address PO Box 722256 | | | 06 18 | 2013 | | |
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| | | State Zip Code OK 73070 | | Transaction ID: 246 | CDD34E0E93EAEEB6 | | |
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| angle | American Society of Plastic Surgeo | ns PLA | ASTYPAC | | | | | | | |
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| Δ | Full Name (Last, First, Middle Initial) Collins for Senator | | | | Date o | f Disburse | ment | | | |
| <i>,</i> | Collins for Seriator | | | | M M | | | V V | V | |
| | Mailing Address PO Box 1096 | | | | 05 28 2013 | | | | | |
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| B. | Dave Camp for Congress | | | | Date o | f Disburse | ment | | | |
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| | Mailing Address 5915 Eastman Avenue Suite 100 | | | | 05 | 2 | 8 | 2013 | | |
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| | Midland | MI | 48640-6824 | | irans | Saction ID | : 13BC4FB | 00D41C | VEV4BB | |
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| | David Lee Camp | | | Category/ Type | | | | 5000 | 0.00 | |
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| _ | State: MI District: 04 | | | | | | | | | |
| С | Full Name (Last, First, Middle Initial) David Scott for Congress | | | | Date o | f Disburse | ment | | | |
| • | David Scott for Congress | | | | M M | _ | | YY | Y | |
| | Mailing Address PO Box 960821 | | | | 05 | 2 | | 2013 | | |
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| | • | State GA | Zip Code 30296 | | Trans | saction ID | : 4973DA62 | 239C3F4 | 4DA1A5 | |
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| | State: GA District: 13 | (-1 | <i>3,</i> ₹ | | | | | | | |
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| Full Name (Last, First, Middle Initial) | | | Data of Dishurasment | | | | |
| A. Diane Black for Congress | | | Date of Disbursement | | | | |
| Mailing Address PO Box 1437 | | | 05 28 2013 | | | | |
| City | State Zip Code | | Transaction ID : 5AC9CB0652880530628 | | | | |
| Gallatin Purpose of Disbursement | TN 37066-1437 | | | | | | |
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| Candidate Name Diane Black | | Category/ | 2000.00 | | | | |
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| Senate President | Primary General Other (specify) | | | | | | |
| State: TN District: 06 | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | |
| B. Donna Christensen Campaign | | | Date of Disbursement | | | | |
| Mailing Address PO Box 5197 | | | 05 28 2013 | | | | |
| City St. Croix | State Zip Code VI 00823 | | Transaction ID : 61EE7440E7065D34C17 | | | | |
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| Donna Marie Christensen | | Type | 2000.00 | | | | |
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| C. Friends of Carolyn McCarthy | | | Date of Disbursement | | | | |
| Mailing Address 151 Linden Road | | | 05 28 2013 | | | | |
| City | State Zip Code | | Transaction ID : 68108D973AB304B513D | | | | |
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| $ \rangle$ | American Society of Plastic Surgeo | ns PL | ASTYPAC | | | | | | | |
| \angle | , | | | | | | | | | |
| A | Full Name (Last, First, Middle Initial) Friends of Joe Pitts | | | | | Date of | f Disburs | ement | | |
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| | State: PA District: 16 | | • | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | |
| В. | Friends of John Boehner | | | | | Date of | f Disburs | ement | | |
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| | Mailing Address 7908 Cincinnati Dayton Road Suite I | | | | | Ub | لا ا | 10 | 2013 | |
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| | John A. Boehner | | | Type | y' | | , | | 500 | 00.00 |
| | Office Sought: House Disbursen | | | | | | | | | |
| | | Primary | General | | | | | | | |
| | President State: OH District: 08 | Other (sp | ecity) 🔻 | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | $\overline{}$ | | | | | |
| C. | Friends of Lois Capps | | | | | Date of | f Disburs | ement | | |
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| An | nerican Society of Plastic Surgeo | ns PLAS | TYPAC | | | | | | |
| _ | Name (Last, First, Middle Initial) | | | | | | | | |
| A. Fri | ends of Sessions Senate Comm | ittee Inc | | | Date | of Disbursen | | Y | Υ |
| Mail | ing Address PO Box 4278 | | | | 06 | 18 | 4 | 2013 | |
| City | 5 | | Zip Code | | Tran | saction ID : | 0F794FD9 | CSE3FI | FR6248 |
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| B. Gu | uthrie for Congress | | | | Date | of Disbursen | | YY | Y |
| Mail | ing Address PO Box 9639 | | | | 05 | | | 2013 | |
| | rling Green | State Z KY | Zip Code 42102-9639 | | Tran | saction ID : | CCBD885 | 21C345 | BA12D7 |
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| c. He | althcare Freedom Fund | | | | Date | of Disbursen | | | |
| Mail | ing Address PO Box 2485 | | | | 06 | 18 | | 2013 | Y |
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| Full Name (Last, First, Middle Initial) | | | | | | | |
| A. Iowans for Latham | | | Date of Disbursement | | | | |
| Mailing Address PO Box 8237 | | | 05 28 2013 | | | | |
| City | State Zip Code IA 50301-8237 | | Transaction ID : 74AE69ED14F60B51E5E | | | | |
| Des Moines Purpose of Disbursement | IA 50301-8237 | | | | | | |
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| Thomas Latham Office Sought: House Disburs | rement For 2014 | Type | 2000.00 | | | | |
| Office Sought: House Disburs Senate President | ement For: 2014 Primary General Other (specify) ▼ | | | | | | |
| State: IA District: 03 | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Dishamon and | | | | |
| B. Lance for Congress | | | Date of Disbursement | | | | |
| Mailing Address PO Box 225 | | 05 28 2013 | | | | | |
| City Colonia | State Zip Code NJ 07067 | | Transaction ID : 79A728A40B5925B459A | | | | |
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| Leonard Lance | | Type | 2000.00 | | | | |
| | ement For: 2014 Primary General Other (specify) ▼ | | | | | | |
| Full Name (Last, First, Middle Initial) C. Maloney for Congress | | | Date of Disbursement | | | | |
| Mailing Address 49 East 92nd St | | | 05 28 2013 | | | | |
| City | State Zip Code | | Transaction ID : D9F46F8B693418C5D79 | | | | |
| New York | NY 10128 | | | | | | |
| Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period | | | | |
| Candidate Name | | Category/ | | | | | |
| Carolyn B. Maloney | | Type | 2000.00 | | | | |
| Senate President | ement For: 2014 Primary General Other (specify) | | | | | | |
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| $ \rangle$ | American Society of Plastic Surgeo | ns PLAS | STYPAC | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | |
| A. | Matheson for Congress | | | | Date of D | isbursement | | |
| | Mailing Address PO Box 521048 | | | | 05 | 28 2013 | | |
| | City | tate | Zip Code | | Transas | tion ID . E742E02CE02EB6E20 | 0 4 4 | |
| | Salt Lake City | UT | 84152-1048 | | Iransac | tion ID : 5712E03CE925B6530 | UAA | |
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| | Candidate Name | | | Category/ | | 2000.00 | | |
| | James David Matheson Office Sought: House Disbursem | ent For: 20 | 21.4 | Туре | | 2555.00 | ч | |
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| _ | State: UT District: 04 | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | | |
| В. | Michael Burgess for Congress | | | | Date of D | isbursement | | |
| | Mailing Address PO Box 2334 | | | | 05 | 28 2013 | | |
| | Denton | tate TX | Zip Code 76202-2334 | | Transac | tion ID : 6BE203259D38D9F8 | 206 | |
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| | Michael Clifton Burgess | | | Category/ Type | | 5000.00 | | |
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| <u>с.</u> | Full Name (Last, First, Middle Initial) Pascrell for Congress | | | | Date of D | isbursement | | |
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| | Mailing Address PO Box 100 | | | | 06 | 18 2013 | | |
| | Teaneck | tate NJ | Zip Code 07666 | | Transac | tion ID : 536CBDE97F4CB322 | 2DEB | |
| | Purpose of Disbursement 2014 Primary | | | | 1 | | | |
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| | William J. Pascrell Jr. | | | Category/ Type | | 2000.00 | | |
| | Office Sought: House Senate Disbursem | nent For: 20 Primary Other (speci | General | Турс | | 7 | | |
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| or | for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) | ie and address of any politic | car committee to | o solicit contributions from such committee. | | | |
| | American Society of Plastic Surgeo | ons PLASTYPAC | | | | | |
| $ \angle $ | , | JIOT ENOTH AO | | | | | |
| ۸ | Full Name (Last, First, Middle Initial) | | | Date of Disbursement | | | |
| A. | Pete Sessions for Congress | | | Date of Disbursement | | | |
| | Mailing Address PO Box 823047 | | | 06 18 2013 | | | |
| | City | State Zip Code | | Transaction ID: 887CCEB63D39D2DF8 | 16 | | |
| | Dallas | TX 75382-3047 | | Transaction iD . 007CCEB03D39D2DF0 | 10 | | |
| | Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period | l | | |
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| | Peter Anderson Sessions | nent Ferri 2011 | Туре | 2000.00 | _ | | |
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| | State: TX District: 32 | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| В. | Price for Congress | | | Date of Disbursement | | | |
| | Mailing Address PO Box 425 | | | 05 28 7 2013 | | | |
| | Roswell | State Zip Code GA 30077 | | Transaction ID: 4E0C985D440439CB70 | 23 | | |
| | Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period | ı | | |
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| | Thomas E. Price M.D. | | Туре | 2000.00 | _ | | |
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| C. | Reed Committee | | | Date of Disbursement | | | |
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| | Cranston Purpose of Disbursement | RI 02920 | | | | | |
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| | Candidate Name | | Category/ | 2500.00 | ٦ | | |
| | Jack Francis Reed Office Sought: House Disbursen | nont For: 2044 | Туре | 2000.00 | _ | | |
| | Senate President | nent For: 2014 Primary General Other (specify) | | | | | |
| | State: RI District: | | | | | | |
| 5 | SUBTOTAL of Disbursements This Page (optional) | | ·····• | 6500.00 |] | | |
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| | | Detailed Summary Page | 270 | 28a 28b 28c 29 | | | |
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| | for commercial purposes, other than using the name | | | | | | |
| | NAME OF COMMITTEE (In Full) | DI ACTIVE : C | | | | | |
| | American Society of Plastic Surgeo | ons PLASTYPAC | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| Α. | Rely on Your Beliefs Fund | | | Date of Disbursement | | | |
| | Mailing Address 209 Pennsylvania Avenue, SE | | | 01 10 2013 | | | |
| | City | State Zip Code | | Transaction ID : 5A3FF4FD0327 | 72502200 | | |
| | Washington | DC 20003 | | Hansaction ib . SASFF4FD0327 | 3303200 | | |
| | Purpose of Disbursement 2013 Contribution | | 011 | Amount of Each Disbursement thi | s Period | | |
| | Candidate Name | | Category/ | 50 | 00.00 | | |
| | Rely on Your Beliefs Fund Office Sought: House Disbursen | ont For: 0040 | Туре | | ,55.55 | | |
| | | nent For: 2013 Primary General | | | | | |
| | | Other (specify) | | | | | |
| | State: District: | Contribution | ı | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | |
| В. | Renee Ellmers for Congress Comm | nittee | | Date of Disbursement | | | |
| | Mailing Address PO Box 99567 | | | 05 28 2013 | | | |
| | 120 | | | | | | |
| | • | State Zip Code NC 27624 | | Transaction ID: 76DD86FF5B57 | 74C813F9 | | |
| | Purpose of Disbursement | | | | | | |
| | 2014 Primary | | 011 | Amount of Each Disbursement thi | s Period | | |
| | Candidate Name Renee Jacisin Ellmers | | Category/ | 20 | 00.00 | | |
| | | nent For: 2014 | Туре | | | | |
| | | Primary General | | | | | |
| | | Other (specify) ▼ | | | | | |
| _ | State: NC District: 02 | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | Date of Dist | | | |
| C. | Ryan for Congress, Inc. | | | Date of Disbursement | | | |
| | Mailing Address PO Box 1488 | | | 05 28 2013 | | | |
| | 011 | | | | | | |
| | , | State Zip Code WI 53547-1488 | | Transaction ID : F8404E7C383E | 5988E4F | | |
| | Purpose of Disbursement 2014 Primary | | | | | | |
| | Candidate Name | | 011 | Amount of Each Disbursement thi | s Period | | |
| | Paul Ryan | | Category/ | 20 | 00.00 | | |
| | • | nent For: 2014 | Туре | | | | |
| | | Primary General | | | | | |
| | President | Other (specify) | | | | | |
| _ | State: WI District: 01 | | | | | | |
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| NAME OF COMMITTEE (In Full) American Society of Plastic Surgeo | ns PLASTYPAC | | | |
| Full Name (Last, First, Middle Initial) | | | | |
| A. Schock for Congress | | | Date of Disbursement | |
| Mailing Address PO Box 10555 | | | 05 28 2013 | |
| | State Zip Code | | Transaction ID: 9470D1EA2911E0CAC4A | |
| Peoria Purpose of Disbursement 2014 Primary | IL 61612 | 011 | Amount of Each Disbursement this Period | |
| Candidate Name | | | Amount of Each Disbursement this Feriod | |
| Aaron Schock | | Category/ Type | 2000.00 | |
| Senate President | nent For: 2014 Primary General Other (specify) | | | |
| State: IL District: 18 | | | | |
| Full Name (Last, First, Middle Initial) B. Stivers for Congress | | | Date of Disbursement | |
| Mailing Address 4679 Winterset Drive | | | 05 28 2013 | |
| , | State Zip Code OH 43220-8113 | | Transaction ID : D4A0F57CC83A4F8BB6 | |
| Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period | |
| Candidate Name Steve Stivers | | Category/ | 2000.00 | |
| Office Sought: House Senate Disbursem | nent For: 2014 Primary General Other (specify) | Type | | |
| Full Name (Last, First, Middle Initial) C. Texans for Senator John Cornyn In | c | | Date of Disbursement | |
| Mailing Address PO Box 13026 | | | 05 28 2013 | |
| Austin | State Zip Code TX 78711 | | Transaction ID: D22B7F064C8619A4744 | |
| Purpose of Disbursement 2014 Primary | | 011 | Amount of Each Disbursement this Period | |
| Candidate Name John Cornyn III | | Category/ Type | 5000.00 | |
| X Senate | nent For: 2014 Primary General Other (specify) | | | |
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| SCHEDULE B (FEC Form 3X) | | FOR LINE N | NUMBER: | PAGE 86 OF 88 | |
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| NAME OF COMMITTEE (In Full) | | · · · | | | |
| American Society of Plastic Surge | ons PLASTYPAC | | | | |
| Full Name (Last, First, Middle Initial) | | | 5 . (5) | | |
| A. Tiberi for Congress | | | Date of Disburseme | / Y Y Y Y | |
| Mailing Address 2931 E Dublin Granville Road Suite 190 | 7: 0 1 | | 05 28 | 2013 | |
| City Columbus | State Zip Code OH 43231-2098 | | Transaction ID : E | 2694648EFBF04F6A37 | |
| Purpose of Disbursement | 43231-2096 | | | | |
| 2014 Primary | | 011 | Amount of Each Dis | sbursement this Period | |
| Candidate Name Patrick J. Tiberi | | Category/ Type | | 5000.00 | |
| | ment For: 2014 | 1,700 | | , | |
| Senate President | Primary General Other (specify) ▼ | | | | |
| State: OH District: 12 | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| B. Truth Accountability and Courage Politic | cal Action Committee (TA | ACPAC) | Date of Disburseme | ent / Y Y Y Y Y Y | |
| Mailing Address 228 S Washington St Ste 115 | | | 05 28 | 2013 | |
| Alexandria | State Zip Code VA 22314 | | Transaction ID: 4 | 2546BE4E1FDF060DF8 | |
| Purpose of Disbursement 2013 Contribution | | 011 | Amount of Each Dis | sbursement this Period | |
| Candidate Name Truth Accountability and Courage Political Action Committee (TACPAC) Category/ Type | | | | 2500.00 | |
| Senate President | nent For: 2013 Primary General Other (specify) | | | | |
| State: District: | Contribution | | | | |
| Full Name (Last, First, Middle Initial) C. Upton for All of Us | | | Date of Disburseme | | |
| Mailing Address PO Box 490 | | | 05 28 | 2013 | |
| City St. Joseph | State Zip Code MI 49085 | | Transaction ID : F | FAA9C347B2C9E818256 | |
| Purpose of Disbursement 2014 Primary | | 011 | Amount of Foob Di | sbursement this Period | |
| Candidate Name | | Category/ | Amount of Each Dis | spursement this Penou | |
| Fredrick Stephen Upton | | Type | 1 | 5000.00 | |
| Senate President | nent For: 2014 Primary General Other (specify) | | | | |
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| SCHEDULE B (FEC Form 3X) | | FOR LINE I | NUMBER: PAGE 87 OF |
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| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | (check only 21b | |
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| or for commercial purposes, other than using the name | e and address of any political | committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | and DLACTVDAC | | |
| American Society of Plastic Surgeo | ons PLAST TPAC | | |
| Full Name (Last, First, Middle Initial) | N - 4' | | Date of Disbursement |
| A. Value in Electing Women Political A | Action Committee | | M M / D D / Y Y Y Y |
| Mailing Address 701 8th Street, NW Suite 500 | | | 06 18 2013 |
| | State Zip Code DC 20001 | | Transaction ID : A8B5CD1D9778F878 |
| Washington Purpose of Disbursement | DC 20001 | | |
| 2013 Contribution | | 011 | Amount of Each Disbursement this Peri |
| Candidate Name | | Category/ | 1000 00 |
| Value in Electing Women Political A | | Туре | 1000.00 |
| Senate | nent For: 2013 Primary General Other (specify) | | |
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| В. | | | Date of Disbursement |
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| President | nent For: Primary General Other (specify) ▼ | | |
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| C. | | | Date of Disbursement |
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| Candidate Name | | Category/ Type | Amount of Each Disbursement this Peri |
| | nent For: Primary General Other (specify) ▼ | 1,7,2 | |
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| ITEMIZED DISBURSEMENTS | Use separate schedule(s) | (check only | NOMBER: | |
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| or for commercial purposes, other than using the nar | ne and address of any political | al committee to | solicit contributions from such committee. | |
| NAME OF COMMITTEE (In Full) | | | | |
| $ \; angle$ American Society of Plastic Surge | ons PLASTYPAC | | | |
| Full Name (Last, First, Middle Initial) | | İ | | |
| A. Lyle S. Leipziger MD | | | Date of Disbursement | |
| Lyle O. Leipzigei MD | | | M M / D D / Y Y Y Y | |
| Mailing Address 825 Northern Blvd | | | 02 27 2013 | |
| Chief-Plastic Surgery-Ns-Lij Suite | State 7in Carla | | | |
| City Great Neck | State Zip Code NY 11021-5321 | | Transaction ID: 1BD089D485B740B0BDC | |
| Purpose of Disbursement | 11021-0021 | | | |
| Refund of 2012 contribution | | 010 | Amount of Each Disbursement this Period | |
| Candidate Name | | Category/ | 700.00 | |
| | | Type | 730.00 | |
| | ment For: | | | |
| Senate President | Primary General Other (specify) ▼ | | | |
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| Office Sought: House | mont For | Туре | | |
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| President | Other (specify) | | | |
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